

2016 – 2017

House Officer Manual

Guidance for House Staff at
Cleveland Clinic Akron General

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Contents

Foreword.....	4
Letter from the Chairman and Designated Institutional Officer	4
Policies Statement	5
Introduction	6
History of Cleveland Clinic Akron General	6
Mission	7
Vision	7
The Akron General Way	7
Goals of Graduate Medical Education	8
Administrative Support	9
House Officer Eligibility	10
House Officer Selection	11
Equal Employment Opportunity Policy –	12
House Officer Contracts	13
House Officer File.....	14
Stipends / Paychecks	16
House Officer Meal Allowance	17
Program Closure or Reduction	18
Program Coordinator Contact Information	19
Cleveland Clinic Akron General Departments	20
Health Information Management (HIM)	20
Medical and Community Health Libraries	22
Medical Photography	23
Security.....	24
Paging Instructions.....	25
Lost Pagers.....	25
Paging from Any CCAG Phone.....	25
Paging from a Non-CCAG Phone.....	25
Making an Overhead Page Request	25
Paging Instructions – Requesting Information	25
Overhead Page Codes.....	26
STAT Page Protocol – Code Blue or Code Pink	26
Tornado Plan (Code Gray).....	27
Bomb Threat (Code Black).....	27
Chemical Spill (Code Orange).....	28
Infant Abduction (Code Adam)	28
Evacuation Plan (Code Green).....	29
Violent Patient (Code Violet)	29
Gun/Hostage Situation (Code Silver).....	29
Fire Plan (Code Red).....	30
Mass Casualty Incident (Code Yellow).....	31

Flood (Code Noah).....	34
Announced Autopsy.....	34
Physical Examination.....	35
License / Training Certificate.....	35
DEA Number.....	36
Uniforms and Laundry.....	36
Secure VPN/RSA Token.....	36
Physician Portal.....	37
Annual Employee Education.....	37
Akron General E-mail Access.....	37
Infection Control.....	38
Institutional Policy for House Officer Duty Hours in the Learning and Work Environment.....	39
Program Requirement.....	39
Institutional Oversight.....	39
Reporting.....	40
Violations.....	40
Duty Hour Exception.....	40
Moonlighting.....	40
Sunlighting.....	41
Rotation Schedule.....	41
On-Call Schedule.....	41
Military Service.....	41
Unscheduled Time Off.....	42
House Officer Responsibilities.....	43
Performance and Decorum.....	44
Smoking.....	45
Use of Personal Electronic Devices.....	46
Questions, Concerns and Complaints.....	47
Code of Conduct.....	48
Sexual Harassment.....	49
Promotion or Non-Renewal of House Officer Contract.....	50
USMLE / COMLEX Requirements.....	52
Guidelines for House Officer Remediation and Disciplinary Action.....	54
Guidelines.....	54
Alternative Actions.....	55
Program Director Authority and Responsibility.....	56
LOA and Academic Training.....	57
Policy for Reconsideration and Internal Review Appeal.....	58
Recommendations or Actions Eligible for Reconsiderations Only.....	58
Recommendations or Actions Eligible for Reconsideration and Internal Review Appeal.....	58
Internal Review Appeal Panel.....	58
Scheduling the Internal Review Appeal.....	59
Internal Review Appeal Process.....	59
Objective and Standard of Review.....	60
Timing of Final Decision.....	60
Medical, Dental, Disability and Life Insurance.....	61

Health Insurance	61
The House Officer Prescription Policy Must be Followed.....	61
Dental Insurance	62
Vision Coverage under Medical Plan.....	62
Flexible Spending Accounts	62
Life Insurance	62
Disability Insurance.....	62
Retirement.....	62
Voluntary Benefits	63
Adoption Assistance.....	63
Sick Leave	64
Family Medical Leave (FMLA)	65
Vacations	66
Training Outside of Affiliated Institutions	68
House Officer Impairment.....	71
Employee Assistance Plan.....	74
Safety Additions.....	75
Mobile Device Policy	75
Prohibition of Food and Drink in Clinical Areas	75
Egress	76
Reporting Any Environmental or Unsafe Issue	76
Appendix A - Cashless Travel Voucher for Resident Physicians	77
Appendix B - Resident Educational Expense Reimbursement	81
Appendix C - House Staff Vendor Interaction Policy	85
Appendix D - Support for Residents and GME Programs in the Event of a Disaster	87
Appendix E - Certification Policy.....	90
Appendix F - Hobart Loan	92

Foreword

Letter from the Chairman and Designated Institutional Officer



Dear House Officer Physician:

Welcome to Cleveland Clinic Akron General! Your role in fulfilling our mission, *to improve the health and lives of the people and communities we serve*, will have a significant impact not only on our organization but on our Community. We are pleased that you have joined the CCAG family and will be a vital part of healthcare in the Akron area.

Our rich and dynamic postgraduate medical education programs have been cultivated by generations of physician leaders for over 70 years! Please know that you will be supported by our Administration as well as an outstanding medical staff, nursing professionals, researchers and educators who are here to ensure you are developing the skills necessary for excellence in your medical practice and I encourage you to commit yourself to life-long learning.

Having walked in your shoes, I understand how important, and at times, how difficult these training years can be. Just know that you can stop by my office anytime to talk, doc to doc. My door is always open to you.

The Department Chairmen, Program Directors, Medical Staff and Senior Leadership at Cleveland Clinic Akron General are always available to assist you in any way. We are excited to be part of your professional journey.

Sincerely,

A handwritten signature in black ink that reads "Titus G. Sheers MD, MBA".

Titus G. Sheers, MD, MBA
Chairman and Designated Institutional Officer
Department of Medical Education and Research

Policies Statement

The intent of this manual is to provide House Officers with relevant information and describe certain expectations, policies and procedures regarding the residency program and the House Officer's responsibilities. The manual is not all-inclusive, and it is not a contract.

House Officers are contract employees of Akron General. Contracts are renewable annually. Contracts are separate from this manual.

House Officers are subject to, and have a responsibility to comply with, both this manual and applicable Akron General Medical Center employee policies, some of which are specifically referred to in this manual. All Akron General Medical Center employee policies are accessible on the Akron General Medical Center intranet (<http://my.agmc.org>). House Officers may request written copies of Akron General Medical Center policies.

This manual is intended to be read in conjunction with Akron General Medical Center employee policies. If this manual does not address a specific topic or issue covered by an Akron General Medical Center employee policy, then the relevant Akron General Medical Center employee policy will control. Conversely, if an Akron General Medical Center employee policy does not address a specific topic or issue that is covered by this manual, then this manual will control. If there is a conflict, inconsistency, or vagueness between a topic or issue that appears in both this manual and an Akron General Medical Center employee policy, then this manual generally will control.

If you have a question whether this manual or Akron General Medical Center employee policy applies or control, you may ask the Program Director, Chairman of Medical Education and Research, Executive Director of Medical Education and Research, or the Akron General Medical Center Human Resources Department.

Introduction

History of Cleveland Clinic Akron General

Founded in 1914 as Peoples Hospital, Cleveland Clinic Akron General has grown to a 511-bed, 26-bassinets, adult, tertiary-care, not-for-profit teaching hospital. Today, it is staffed by nearly 7,000 employees, physicians, medical professionals and volunteers who serve a population of more than 1.2 million people throughout Summit, Medina, Portage, Stark and Wayne Counties of Northeast Ohio. Akron General is a not-for-profit healthcare organization with the mission of improving the health and lives of the people and communities we serve.

As a major teaching hospital, Akron General trains future physicians through 10 high-quality medical residency programs and two fellowships. Akron General is a teaching affiliate of the Northeast Ohio Medical University, a State of Ohio facility that serves as the Medical College of the University of Akron, Kent State University and Youngstown State University.

Technology is becoming increasingly important in the practice of medicine. Akron General is using information and technology every day to improve patient care. Physicians now have wireless access inside the hospital and from their offices to patient charts and test results - in real time. That means they are able to spend more time where they prefer to be - with their patients.

Akron General has been cited in the “U.S. News and World Report” hospital rankings and has regional referral centers in cardiovascular, cancer, women’s health and musculoskeletal and rehabilitation care. The Medical Center also provides numerous areas of specialty care including: a Critical Care Center and Stroke Team, a multidisciplinary Level I Trauma Center, a Wound Center and Hyperbaric Medicine, a Sleep Disorders Center, special care nursery with Children’s Hospital of Akron, Diabetes Education, Spiritual Care and MedFlight of Ohio for ground and air critical-care transportation.

As one of the largest employers in a three-county area, Akron General is proud to also be a Northcoast 99 Employer of Choice for the past 13 years. This means that Akron General was one of Northeast Ohio’s top 99 employers in Northeast Ohio based on meeting employee’s needs through benefits, health & safety, training & education, diversity and employee communication.

Akron General is a member of Akron Regional Hospital Association, Ohio Hospital Association, American Hospital Association and Voluntary Hospitals of America, and is a major teaching affiliate of the Northeast Ohio Medical University. Akron General and its clinical affiliates are accredited by the Joint Commission.

In 2015, Akron General became a full member of the Cleveland Clinic health system. The coming together of these two organizations provides patients in the region with access to the highest quality, safest and value-based care. With full membership, Akron General remains committed to providing superior patient care locally and looks forward to expanding our health

care services. Simply, the people of Summit County will enjoy the highest level of care and services, close to home.

Cleveland Clinic Akron General includes Akron General Medical Center; Akron General Partners, which includes Partners Physician Group, the Akron General health and wellness centers, Lodi Hospital, Community Health Centers and other companies; Edwin Shaw Rehabilitation Hospital; Visiting Nurse Service, a post-acute company; and Akron General Foundation. For more information on Akron General, visit our website at www.akrongeneral.org.

Mission

Cleveland Clinic Akron General's Mission is to improve the health and lives of the people and communities we serve.

Vision

Cleveland Clinic Akron General is an inspired community of persons committed to health and healing. We passionately pursue excellence in medical education and lifelong learning for ourselves and the communities we serve. This unparalleled commitment will assure superb clinical outcomes, extraordinary service, and exceptional performance.

The Akron General Way

Be Nice

Make eye contact and say "hello" to those you pass in the hallways: patients, visitors, and fellow employees. Let's not only make Akron General the highest-quality Health System, but also the friendliest.

Work Hard

We are all working incredibly hard already, but we need to stretch ourselves even more if we are to achieve the success that is possible for this great Health System. Keep looking for better ways to "improve the health and lives of the people and communities we serve."

Accommodate

Go out of your way to be helpful and please try to avoid saying "no." Find a way to get things done...with a smile on your face.

Goals of Graduate Medical Education

The goals of the residency training programs at Cleveland Clinic Akron General are to provide the graduate physician with demonstrated mastery of the following competencies as required by the Accreditation Council of Graduate Medical Education (ACGME):

1. Patient care that is compassionate, appropriate and effective for the treatment of health problems and the promotion of health.
2. Medical knowledge about established and evolving biomedical, clinical and cognate sciences and the application of this knowledge to patient care.
3. Practice-based learning and improvement that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence and improvements in patient care.
4. Interpersonal and communication skills that result in effective information exchange and teaming with patients, their families, and other health professionals.
5. Professionalism as manifested through a commitment to carrying out professional responsibilities, adherence to ethic principles, and sensitivity to a diverse patient population.
6. Systems-based practice, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.

Program Oversight

The Chairman of Medical Education and Research has overall authority and responsibility for all matters pertaining to Undergraduate, Graduate, and Continuing Medical Education, and serves as the Chairman of the Medical Education Committee.

The Chairman of Medical Education and Research should be considered the first administrative contact for House Officers in need of any special assistance. The Chairman is responsible for both Institutional and Program compliance with ACGME and RRC requirements.

The Cleveland Clinic Akron General Department of Medical Education

The Department of Medical Education is responsible for the coordination and oversight of the undergraduate, graduate, continuing medical education, and resident research programs. In addition, it is responsible for:

- Recruitment and selection of a full complement of house staff;
- Provision of supervision and liaison to all house staff and medical students on education matters; and
- Oversight for the educational curriculum of all residency programs.

Administrative Support

If you have any questions related to your training, please contact Ryan McCormick, Graduate Medical Education Coordinator. Ryan will be happy to assist you. To ensure that accurate records are maintained, all changes in your address or telephone numbers must be reported to Ryan.



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The Medical Education office is located next to the Conference Center Auditorium (CCA). Hours of operation are 8:00am to 4:30pm, Monday through Friday. Medical Education is a swipe access department. We are happy to help you in any way we can.



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House Officer Eligibility

In compliance with ACGME Institutional Requirements, Akron General Medical Center will ensure that its ACGME-accredited programs select from among eligible applicants on the basis of program-related criteria such as their preparedness, ability, aptitude, academic credentials, communication skills, and personal qualities such as motivation, integrity, and their ability to benefit from the program to which they are appointed. ACGME-accredited programs must not discriminate with regard to sex, race, age, religion, color, national origin, disability, veteran status or any other legally protected status.

Applicants with one of the following qualifications are eligible for appointment to accredited residency programs in compliance with ACGME Requirements:

1. Graduates of medical schools in the United States and Canada accredited by the Liaison Committee on Medical Education (LCME).
2. Graduates of osteopathic medicine in the United States accredited by the American Osteopathic Association (AOA).
3. Graduates of medical schools outside the United States and Canada who meet one of the following qualifications:
 - a. Have received a current and valid certificate from the Educational Commission for Foreign Medical Graduates prior to appointment.
 - b. Have a full and unrestricted license to practice medicine in a United States licensing jurisdiction in which they are in training.
4. Graduates of medical schools outside the United States who have completed a Fifth Pathway program provided by an LCME-accredited medical school.

The institution must monitor compliance of each program with these procedures.

House Officer Selection

In selecting from qualified applicants for positions, all programs shall participate in the National House Officer Matching Program (NRMP) and Urology in the American Urological Association (AUA). All applicants should apply for residency through the Electronic Residency Application Service (ERAS). International Medical Graduates may apply through ERAS via the Educational Commission for Foreign Medical Graduates (ECFMG).

Candidates for Admission to Akron General's residency programs must have the following qualifications to be eligible for appointment:

1. A complete application package that includes the following:
 - Completed application
 - Transcript from medical school
 - Curriculum Vitae
 - Dean's Letter
 - USMLE or COMLEX Board Scores
 - Three letters of recommendation
2. Additional requirements for IMG applicants:
 - Valid ECFMG Certificate (to be included in the ROL, this applies to only those IMG candidates that are not US citizens)
 - ECFMG reports (required for Visa and Ohio Training Certificate)
3. Minimum Board Score Requirements:
 - USMLE 1&2: Minimum 1st pass rate or Satisfactory Scores
 - IMG: USMLE 3: Minimum 1st pass rate or Satisfactory Scores (required for H-1B visa holders only)
 - COMLEX 1&2: Minimum 1st pass rate or Satisfactory Scores
4. Maximum of five (5) years graduation from Medical School
5. H1-B and J-1 Visas are currently accepted.

**All applications for all programs are processed through
ERAS. Paper applications are not accepted.**

Equal Employment Opportunity Policy –

Akron General is committed to the principle of equal employment opportunity for all employees and to providing employees with a non-discriminatory employment environment, workforce diversity and inclusion and these commitments are included in Akron General's policies and practices. Akron General administers all terms and conditions of employment, including but not limited to recruitment, employment, promotion, transfer, training, benefits, and wages without regard to race, color, religion, sex, sexual orientation, gender identity, genetic information, national origin, ancestry, handicap, age, pregnancy, marital status, disability, military status, veteran or Vietnam Era Veteran status. Akron General will not tolerate discrimination or harassment based on any of these characteristics. Akron General Medical Center complies with all federal, state and local laws, rules and regulations in the area of non-discrimination in employment, and is committed to a program of equal opportunity, which is consistent with the goals, mission, and values of our organization.

Human Resources Policy 3.08 (Equal Employment Opportunity and Workforce Diversity & Inclusion) is available in Human Resources for review, upon request, or online on the Akron General Medical Center Intranet listed under HR Policy 3.08.

House Officer Contracts

Each House Officer will enter into a House Officer Contract with Akron General Medical Center. House Officer Contracts, which cover duties and responsibilities, have one-year terms. House Officer Contracts are separate from this Manual.

House Officer Contracts may or may not be renewed, either because of performance (academic/clinical or behavioral) deficiencies, or because of administrative, budget, or funding reasons, including elimination or reduction of House Officer positions.

The decision not to renew a House Officer Contract will be communicated in writing to the House Officer by the Program Director, after discussion with the Chairman of the Department of Medical Education and Research, generally no later than four months prior to the end of House Officer's current House Officer Contract during the House Officer's non-terminal year, if possible.

If the primary reason for non-renewal occurs within the four months prior to the end of the current House Officer Contract, the Program Director will provide the House Officer with as much written notice of the intent not to renew as circumstances reasonably allow. These communication and notification provisions do not apply to House Officers who are in their terminal year.

House Officer Contracts may also be terminated, at any time, for cause resulting in dismissal from the program.

A House Officer whose House Officer Contract is cancelled or is not being renewed for performance reasons may request a Reconsideration and Internal Review Appeal.

A House Officer whose House Officer Contract is not being renewed, because of administrative, budget or funding reasons, including reduction of House Officer positions, is not eligible for Reconsideration and/or Internal Review Appeal.

House Officer File

A permanent file will be maintained on each House Officer in the Medical Education Department. This file shall include the following items during residency, as applicable:

- Annual House Officer contracts;
- Annual contract authorization forms;
- Medical school diploma;
- Complete ERAS Application
 - Official academic transcripts;
 - Dean's letter;
 - Three (3) current letters of recommendation;
 - USMLE or COMLEX scores – Step 1 and Step 2, clinical knowledge and clinical skills assessment;
- Initial BLS & ACLS certification;
- ECFMG Certificate (if applicable);
- J-1 or H-1B visa information (if applicable);
- Valid Training Certificate; and
- Graduation authorization (at successful completion of program)

The House Officer's permanent residency program file is maintained in the residency program department. This permanent House Officer file contains program-specific information concerning the House Officer.

House Officers have the right to review the documentation in their Medical Education file with adequate advance notice (at least two business days), and while in the presence of a representative of the Department of Medical Education. Under no circumstances shall this file be removed from the Department of Medical Education. House Officers may not add or remove any items to/from their Medical Education file. House Officers may request one (1) entire copy of their file as a courtesy, only if the House Officer has filed a formal request for appeal to the Designated Institutional Officer. Such a request must be made in writing. The file will be made available within seven days of the written request.

House Officers have the right to review the documentation in their permanent House Officer file, that is maintained by the individual programs, with adequate advance notice (at least two business days), and while in the presence of a program representative appointed by the Program Director. Under no circumstances shall this file be removed from the Program's Office.

House Officers may not add or remove any items from their permanent House Officer file. House Officers may request one (1) entire copy of their permanent departmental House Officer file as a courtesy, only if the House Officer has filed a formal request for appeal to the DIO. Such a request must be made in writing. The file will be made available within seven days of the written request.

The Department of Human Resources at Akron General Medical Center also maintains a data file on each House Officer. House Officers are responsible for notifying the Graduate Medical Education Coordinator in the Department of Medical Education and the Department of Human Resources of any change of name, address, or telephone number so the data file may be kept current.

Stipends / Paychecks

Akron General will provide each House Officer with a stipend as described below. Stipends represent compensation for patient care services and support for the educational components of the residency program. The appropriate stipend level will be recommended by the Department of Medical Education annually and is subject to the approval of the Board of Trustees.

The stipends for the 2016-2017 academic years are as follows:

First year level of training	\$51,475.00
Second year level of training	\$53,544.00
Third year level of training	\$55,266.00
Fourth year level of training	\$57,577.00
Fifth year level of training	\$59,441.00
Sixth year level of training	\$61,988.00

Stipends must be deposited directly into a checking account in a participating bank of the House Officer's choosing according to a bi-weekly schedule determined by Akron General. The House Officer will continue to be offered his/her appointment, with accompanying stipend and perquisites, only as long as his/her obligations, as described in this manual, continue to be performed in an acceptable and professional manner.

House Officers' pay stubs may be viewed on the employee portal (www.akrongeneral.org/employee). The annual stipend is divided into 26 equal pay periods, each covering a two-week period. It is the House Officers' responsibility to notify Human Resources and/or Medical Education of any monies overpaid in error in a timely manner. Federal, state and local laws require the following deductions be made from the gross income of House Officers: federal withholding tax, social security, City of Akron income tax, and State of Ohio income tax.

House Officer Meal Allowance

The hospital cafeteria - Fresh Inspirations Café - is open to hospital House Officers, Employees, Students, Nurses, Visitors, and Guests.

Hours for meal services are as follows, Monday thru Sunday, including holidays:

Breakfast	6:30 - 10:00am
Lunch	11:00 - 2:00pm
Dinner	4:30 - 7:00pm
3rd shift	1:30 - 3:00am

The Fresh Inspirations Café is also open in between meal services:

From 10:00 and 11:00 in the morning, Beverages, Snacks, and Simply to Go meal items are available. From 2:00 and 4:00 in the afternoon, the Grill, Deli, Salad Bar, Beverages, Simply to Go meal items, and Snacks are available.

House Officers are allotted a bi-weekly allowance of up to \$130. If a House Officer should go over the allotted amount, the overage will be deducted from the House Officer's paycheck. House Officers swipe their name badge to utilize this service in the hospital cafeteria (Fresh Inspirations Café). Food is also available in the main on-call quarters on the 4th floor.

Meals can be provided for a House Officer's immediate family in the cafeteria on Saturdays, Sundays and those holidays recognized by the hospital while the House Officer is on duty. In addition, meals can be provided to the House Officer's immediate family if the opportunity arises, they can join them while the House Officer is on call. These meals will need to be paid for by the House Officer, and all receipts reflecting these charges must be submitted to the Department of Medical Education for reimbursement. **Do not use your meal allowance to pay for your family.**

No removal of food from hospital property is allowed. Disciplinary action up to and including termination from the program shall be considered upon violation of this rule.

<p>Note: The allowance does not work in Au Bon Pain. All purchases made there are the responsibility of the resident via payroll deduction, cash or charge.</p>
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Program Closure or Reduction

According to Section IV.N of the Institutional Requirements of the Accreditation Council for Graduate Medical Education (2015), which can be located at http://www.acgme.org/Portals/0/PDFs/FAQ/InstitutionalRequirements_07012015.pdf, the Sponsoring Institution (AGMC) must have a written policy that addresses a reduction in size or closure of a residency program. The following policy is intended to meet this requirement.

Policy

This shall serve as the Akron General Health System's Residency Closure or Reduction Policy.

Purpose

In the event that Akron General Medical Center must close a residency program or reduce the complement of House Officers, and to meet Section IV.N of the ACGME Institutional Requirements (2015).

Focus

To ensure that all House Officers will be notified and assisted in finding comparable ACGME-approved programs in which to continue their education.

Procedure

Akron General Medical Center strongly supports its Department of Medical Education. In the unlikely event that Akron General Medical Center must close a residency program or reduce the complement of House Officers, Akron General Medical Center will inform the Graduate Medical Education Committee, the Designated Institutional Official (DIO) and all affected House Officers and personnel as soon as possible. House Officers currently enrolled will either be allowed to complete their educational program or Akron General Medical Center will assist them in enrolling in an ACGME-accredited program(s) in which they can continue their education. They will, at a minimum, be allowed to complete the current academic year.

Program Coordinator Contact Information



Emergency Medicine

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Obstetrics & Gynecology

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General Surgery

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Internal Medicine Categorical Preliminary Year

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Internal Medicine Categorical Preliminary Year

Rachel Mesek
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Cleveland Clinic Akron General Departments

Health Information Management (HIM)

Location and Hours

The Health Information Management Department is located on the ground floor of the hospital across from the cafeteria. It is open 7:00am–11:30pm, seven (7) days a week. If you have Chart Completion specific questions, the Specialists are available Monday through Friday, from 8:00am–3:00pm.

The hospital uses a computerized medical records system known as ChartMaxx. Medical records may be completed on-line on the ChartMaxx System. Computers are available in Health Information Management; on each patient care unit, Medical Library, Physicians' Service Center, outpatient areas including Akron General Medical Center Health & Wellness Facilities and Children's Hospital. You may also complete from home using a Secure I.D. Card.

Training

Training for ChartMaxx is available in Health Information Management weekdays from 8:00am–3:00pm.

Security

Medical records may not be removed from the Medical Center at any time. Microfilm may be reviewed in Health Information Management. Electronically stored records on ChartMaxx may be reviewed on all patient care areas, Medical Library, Physicians' Lounges, outpatient treatment areas and in Health Information Management. A conference room in Health Information Management is available for conferences where electronically stored medical records are to be reviewed.

Suspension

House Officer suspensions will occur for any medical record not completed timely. Suspensions occur for one (1) or more medical record/s that have not been completed 12 days from the process date. Suspensions occur promptly at 11:00am every other Wednesday.

Charting Responsibilities

Telephone Orders: All telephone orders should be signed within forty-eight (48) hours.

Verbal Orders: All verbal orders should be signed as soon as possible after giving the order(s) or within (48) hours.

**All documentation requires
a legible signature and pager number.
*If you sign, be sure to include the date and time.***

Chart Completion

The medical record is completed by the least senior House Officer on the case. In the case of two or more least senior House Officers, the chart is completed by the discharging House Officer. The first assistant on a surgery dictates the operative report and discharge summary, unless otherwise determined by the surgeon. If there is any confusion about who is to complete the chart, one reassignment will be made. After that, the chart will be assigned to the chief House Officer. The chief House Officer will then make the final determination on who should complete.

Rotations

The House Officer is responsible for completion of all medical records before leaving for a rotation off site.

Medical students must be monitored and a House Officer or attending physician must cosign all entries. Medical students are prohibited from dictating reports.

Outpatient Surgery Charts

Outpatient surgery charts require an admission history and physical examination report, appropriate diagnostic work, a written operative progress note and a dictated operative report. The final progress note must have the final diagnoses and procedures listed, with no abbreviations. These reports are to be completed at discharge.

Emergency Department Charts

Any consulting House Officer who is not currently rotating in the ED who sees a patient needs to write all orders on a Hospital Order Sheet and NOT on the ED Order Sheet. This will insure any consultant orders will follow the patient to the floor/unit. This, however, does not mean that any urgent orders cannot be taken off in the ED.

Charts on Readmission

To review previous medical records on a patient, determine if the chart is on microfilm or ChartMaxx. ChartMaxx records can be viewed on the computers located on each patient care unit. Microfilm records must be viewed in Health Information Management. Microfilm may not be removed from Health Information Management except to predetermined areas.

Central Dictating System

The central dictating system can be accessed by dialing 46026 or 42099. If calling from outside the medical center, dial 330-344-6026. **NEVER** use a cell phone. Enter your ID# followed by the “#” sign. Enter the work type you wish to dictate followed by the “#” sign. Enter the account number followed by the “#” sign. Dictate the medical record number and the dates of service as part of your dictation.

Dictate at a steady even tone. Don’t talk slowly or rapidly. Please don’t eat or chew gum while dictating. NEVER use a cell phone—please dictate from land lines only. Be considerate of the person who will be listening to your voice and sounds as they transcribe your report. If you wish to PAUSE, press 4, and press 2 to resume dictation. If you want to be sure you are in the system, press 3 to reverse a few words and press 2 to resume dictation. State your name, account number, the patient’s name (spell if necessary), the patient’s medical record number, the type of report

you are dictating and date(s) of service. Spell new medical terms or new drugs. Your cooperation will ensure your reports are transcribed quickly and filed on the correct chart and in the correct visit.

At the conclusion of your dictation, pressing “###” will give you the job number for your dictation. You may want to make a note of this for future reference if necessary.

Work Types

- 1 = History and Physical
- 2 = Operative Report
- 3 = Discharge Instructions only
- 4 = Discharge Summary
- 6 = Cardiac Cath
- 8 = Consult
- 9 = Surgical History & Physical

There are other department-specific work types you may be using during your rotations.

Listen Line Access

To access all dictated reports:

1. Dial the dictation system (42099 or 46026). Outside the Medical Center, add 330-34 before each number.
2. Hit #1
3. Enter your 4-digit ID number followed by the # sign.
4. Enter the patient’s medical record number
5. You will hear the patient’s reports starting with the most current. Hit a “5” to hear the next most current.

If you do not come across the report you are looking for, try entering the account # or for radiology, the procedure #.

Medical and Community Health Libraries

Clare Leibfarth	Medical Librarian	46243
Denise Mullins	Operations Assistant	41558

The Cleveland Clinic Akron General Medical Library is on the second floor of the hospital, adjacent to the main lobby and across from the Administration offices. The Medical Library is staffed Monday through Friday, 8:00 a.m. to 4:30 p.m. Access to the Medical Library is available to House Officers 24 hours a day via badge swipe access.

The Medical Library’s several thousand current journal subscriptions are 100% electronic. Over 1,000 e-books augment the extensive print book collection. Akron General is an OhioLINK affiliated library, which allows library patrons to borrow material from all major research libraries across the state of Ohio. The Medical Library provides access to point-of-care resources including UpToDate, Clinical Key, VisualDx, and the Cochrane Database of Systematic

Reviews. Custom online "electronic libraries" library guides are available for each residency program to provide access to all of the Medical Library's electronic resources in that subject area. The electronic resources are also available off-site through the VPN secure network, with the exception of UpToDate. Mobile apps are available for the point-of-care resources. We are an OhioLINK member, which allows library patrons to borrow material from all major research libraries across the state of Ohio.

Library services include database searching and research support by a professional librarian. The interlibrary loan service will supply you with material not available on-site. The Medical Library offers a 13-station computer lab with high-speed internet access, as well as 4 computer stations outside the lab. There are 2 meeting rooms in the library which can be scheduled for group use.

For more information or personalized training, contact the library staff at 330-344-6243.

Medical Photography

Mark Riggs	Medical Photographer	46419	mark.riggs@akrongeneral.org
Michael Candiotti	Spec Audio Visual	46419	michael.candiotti@akrongeneral.org

Medical Photography Department provides the following digital services for the House Officers and Attending Staff:

1. Digital images for lectures and conferences. This can include:
 - Articles
 - X-rays
 - Patient photography
 - Surgical photography

Medical Photography will make a CD disk as an end product, which will allow a user to insert digital images from the list above, into a PowerPoint presentation.

2. Video-taping/editing
3. CD duplication

Photographic work except surgery, patient, morgue and tissues must be in the Department and ready to be photographed at least three (3) working days prior to the date of the conference.

For use of any equipment (e.g., LCD Projector with laptop, etc.), please call the Medical Photography Office at 330-344-6419. Please place the request for all audio/visual equipment as soon as conference is scheduled to make sure there is equipment available. Equipment is given on a first-come, first-serve basis and is to be picked up and returned to the Medical Photography Department or the Security Office on the 2nd floor. Please return equipment as soon as possible.

For your convenience you can e-mail the Medical Photography Department for equipment requests.

Department of Research

Nairmeen Haller, PhD	Director	46001
Diane Post	Secretary	46947
Kalisha Washington, MA, CCRP	IRRB/Compliance Coordinator	46391
Chanda Mullen, PhD	Research Coordinator	46236
Joseph Gabra, D.Eng	Research Coordinator, Surgical Specialties	46791
John Elias, PhD	Sr. Research Scientist, Biomechanics	46176

The Department of Research is now located on the ABIA Campus (47 N. Main St, Akron OH 44308) and provides support for clinical, translational, and basic science research. Faculty and staff are available to help with all aspects of the research process. Additionally, the Department of Research has a fully equipped biomechanical testing laboratory, as well as image analysis software.

The Akron General Medical Center Department of Research [Intranet](#) site has information about our Institutional Research Review Board (IRRB) requirements and meeting deadlines, guidelines for research funding, templates, contact information and other helpful information and resources. The Department of Research web address is http://my.agmc.org/portal/page/portal30/AGMC_DEPT/AGMC_RESEARCH.

Contact Dr. Nairmeen Haller, Director of Research, for information about getting involved in research or other scholarly activity at Akron General.

Security

Dispatch		47604
Dan Beaver	Manager, Security and Parking	46681
Rick Law	Supervisor, Security	45811
Badging Office		42199
Debbie Miller	Supervisor, Security	41638

Security Dispatch is located in the Main Lobby near the Main Entrance. Security will assist you with vehicle registration, intervention with combative/violent patients or visitors, escort service to vehicles during night hours in decks and parking lots, after hour access to offices, departments, (with proper authorization) call rooms, etc., battery boost and key service.

The badging office, located in Human Resources, will assist you with photo IDs. You may also call the Badge line at extension 42199 to leave requests for name or department changes, as well as reporting lost badges. All replacements will be left in the Security Dispatch Office on the 2nd floor. A \$10 non-refundable fee is assessed by payroll deduction for replacement of photo IDs for lost or stolen badges. ID badges must be worn at all times above the waist. The key card must be returned to the Security Department, Human Resources, or Medical Education upon the permanent completion of your program.

Paging Instructions

Lost Pagers

Pagers are the responsibility of the individual carrying the unit. If one is lost, a replacement will be ordered and a \$20 fee will be charged back to the individual.

Paging from Any CCAG Phone

All Akron General Medical Center phones have direct access to phone lines specifically dedicated to the paging system. To execute a page, follow these steps:

1. Pick up an Akron General Medical Center phone.
2. Dial 77.
3. Wait for the dial tone and press 0.
4. Enter the four-digit pager number you are calling.
5. Hang up the phone.

Paging from a Non-CCAG Phone

A page can only be sent from a touch tone phone (not all push button phones that “beep” are touch tone phones). To execute a page from any off-campus touch tone phone, follow these steps:

1. Dial the complete ten-digit pager number: 330-250-xxxx.
2. You will hear four short beeps.
3. Enter the ten-digit pager number. You will hear 4 short beeps.
4. Enter the page by dialing the phone number where you can be reached.
5. Hang up the phone.

Making an Overhead Page Request

Dial x46111 from an on campus phone to reach the hospital page operator. Give the pager operator your name and the number of the person you are paging. Remain on the line until the paged person answers. If paging from outside the hospital, give the operator the full number to call (e.g., 330-344-6050).

Paging Instructions – Requesting Information


Please dial “0” for the Hospital Operator when requesting information regarding directory assistance with the hospital.


Overhead Page Codes


EMERGENCY

OVERHEAD PAGE CODES

 **Code Red: Fire**

 **Code Adam: Infant/Child Abduction**

 **Code Black: Bomb Threat**

 **Code Gray: Severe Weather/Tornado**
 Phase I: Warning - Prepare
 Phase II: Sighted - move to safe area

 **Code Orange: Hazardous Material Spill/Release**

 **Code Blue: Medical Emergency/STAT - Adult**

 **Code Pink: Medical Emergency/STAT - Child**

 **Code Yellow: Disaster**

 **Code Violet: Violent/Combative Patient**

 **Code Silver: Person with Weapon/Hostage Situation**

 **Code Brown: Missing Patient**

 **Code Green: Evacuation**

 **Code Noah: Flooding**

EMERGENCY

PHONE NUMBERS

Main Campus

Fire:..... 46222

Security:..... 47604

STAT: 46020

Edwin Shaw..... 9.911

H&W West..... 58008

H&W North..... 53170

H&W Green..... 65050

Lodi..... 39018

VNS 9.911

Entities not listed 911

SYSTEM SAFETY OFFICER:
330.344.6128

AGMC Emergency Overhead Page Codes. Detailed descriptions of these codes and their meaning can be found on the Intranet under "MCI Reference / Overhead Page Codes."

STAT Page Protocol – Code Blue or Code Pink

The STAT Page Team will be composed of all House Officers on-call for Internal Medicine and Surgery for the day. The most Senior Medicine House Officer present is in charge of the STAT unless s/he designates someone else to give orders. The Senior Medicine House Officer is to delegate resuscitation responsibilities during the STAT. In addition, a nurse will be dispatched from the Coronary Care Unit to aid in the use of drugs and intravenous solutions. An anesthetist will respond from the Operating Room and will be totally in charge of the airway and respiratory activities of the patient once s/he is arrived. An EKG technician will respond with an EKG

machine and will be assigned on a daily basis. A respiratory therapist, nursing coordinator and nurse on the floor where the STAT Page occurs will round out the team. No other personnel are to be involved unless specifically called upon by the medical House Officer in charge. The House Officer in charge or nursing coordinator may also ask individuals to leave if their services are not needed. The Emergency (STAT Page) Cart will be brought from the appropriate assigned location.

Emergency (STAT) Pages

- Code Blue: An adult medical emergency
- Code Pink: A pediatric medical emergency

These emergency pages are announced on the overhead paging system three times like this: “CODE BLUE” or “CODE PINK” (location), CODE BLUE or CODE PINK (location), CODE BLUE or CODE PINK (location). When you hear this, do not call the operator; report immediately in person to the announced location as outlined in your STAT page protocol. If you are on call, you will also be paged individually.

You will receive an alpha page with the location. The following is a backup system when the alpha system is unavailable.

On your pocket pager, a CODE BLUE or CODE PINK (emergency) page is differentiated from other pages by beginning with “99-.” That is, any page you receive that begins with “99-“ will indicate that a CODE BLUE or CODE PINK is occurring. The numbers immediately following this code will notify you of the phone number of the CODE BLUE or CODE PINK location.

For CODE BLUE or CODE PINK paging, it is intended that all those on-call should rely primarily on the overhead page system. Your pocket pager simply acts as a secondary system in case you are in an area where you cannot hear the overhead system.

Tornado Plan (Code Gray)

Overhead paging of “Code Gray Tornado Phase I” means the National Weather Service has issued a Tornado Warning (i.e., a tornado has been seen or detected by radar in the area) for the surrounding area of Akron and Summit County. Plan activation requires patient care areas be secured by closing blinds and drapes. Newborn babies in the New Life Center are to be given to their mothers.

Overhead paging of “Code Gray Tornado Phase II” indicates a potential tornado strike of the Akron General Medical Center campus. All patients, employees and visitors should prepare for a strike.

Bomb Threat (Code Black)

An Overhead page of “Code Black” indicates the potential of a bomb in or around the Hospital. Listen for instructions by the page operator, which may include a search of your work area for suspicious items for reporting to security.

Chemical Spill (Code Orange)

A Code Orange is called when there is a hazardous materials spill/release (e.g., nuclear, biological, chemical or unknown substance).

Internal - Refer to safety manual. AGHS 10: Spill Policy found on the homepage intranet.

External - refer to MCI/Disaster Manual

AGHS has hazardous chemicals and waste on site. Due to this, EPA and OSHA man-dates we have a Global Harmonized Communication Standard. This consists of: storage, disposal, Safety Data Sheets (SDS), spill responses, labeling, and training.

Safety Data Sheets (SDS) are like fingerprints of that particular product / chemical. Ours are located on the Intranet homepage as well as a hard copy in the Safety Department.

If a spill occurs, an Occurrence/Near Miss Form (located on the intranet under forms/safety forms) needs to be completed by person who is responsible for the spill or who found the spill. EPA requires us to report any spill over 16 ounces to them every year. The acronym S-W-I-M needs to be followed during a spill:

S	Secure area
W	Warn others to stay away and wait help
I	Inform supervision
M	Minimize exposure (stay upwind, upwind)

Refer to the orange MCI Manual for instructions. Look for SSP 5- Hazardous Materials and Waste Management.

Infant Abduction (Code Adam)

Overhead paging of “Code Adam” indicates the potential for the unauthorized removal of an infant from the New Life Center (L&D, 2400, 2100 or SCN).

If a Code Adam is announced by the overhead page system:

- Follow the instructions given by the overhead page operator.
- Monitor all hallways, stairwells, bridges, and exits leading out of the hospital.
- Stop and inspect anyone pushing, pulling, or carrying anything large enough to conceal a newborn infant. Safety in numbers. Contact Security (47604) if someone fails to cooperate and attempt to follow them until Security arrives.

When appropriate, the overhead page operator will announce the cancellation of the Code Adam. This will be announced three times. All departments and employees may return to their regular duties.

Evacuation Plan (Code Green)

At times, it may be necessary for AGMC occupants to be quickly moved to escape fire, bomb threat hazard, or another internal disaster. The Evacuation Plan, located in the MCI Manual, provides guidelines for such evacuations. In order to provide the continued provision of healthcare service at other facilities, the entire facility may need to be evacuated, such as in the event of a total loss of heat during the winter. Partial evacuations such as a single room or an entire floor may also occur.

In order to understand what actions may be required of you, the following definitions are provided:

Immediate Danger Zone: The area in which the disaster has caused damage and/or in which injury will occur if not evacuated immediately.

Safe Zone: The safe zone is the area or areas adjacent to the immediate danger zone in which at least temporary refuge can be taken.

Four different evacuation levels may occur:

Level I - Removal of persons from the immediate danger zone, such as in a patient room where there is a fire, the patient should be moved to any location outside the room to provide temporary refuge from the danger.

Level II – Horizontal removal of persons from the corridor, outside the patient room, beyond the first smoke/fire barrier on the same floor. Such barriers or separations are identifiable by doors in primary corridors or any stairwell.

Level III – Vertical removal of persons from the floor of the immediate danger zone to a location on the floor(s) below as outline in the evacuation plan.

Level IV - Removal of persons from **a portion or all of the hospital buildings** to a safe location on the campus, to other buildings within the community, or to another healthcare facility.

To facilitate timely evacuation, it is imperative that each employee knows the primary and secondary evacuation locations for his or her work area.

Violent Patient (Code Violet)

A Code Violet indicates a violent/combatative patient or visitor. Stay away and help keep others away from the area identified in the page.

Gun/Hostage Situation (Code Silver)

A Code Silver indicates a person with a weapon or a hostage situation. Stay away and direct others (patients/visitors) to stay away from the area identified in the page.

Fire Plan (Code Red)

A fire will be announced like this: “Code Red (location), Code Red (location).”

All personnel are to report all fires to Safety and Maintenance, no matter how minor they may seem and even if they are extinguished.

RACE

If you detect a fire, carry out the following procedure immediately (R-A-C-E):

- R** Remove persons from the area of immediate danger.
- A** Activate the fire system. Pull the fire alarm box. Call the operator at ext. 46222.
- C** Contain the fire by shutting doors.
- E** Extinguish the fire with the appropriate fire extinguisher, if applicable. If an extinguisher cannot be used safely, evacuate immediately.

PASS

When using a fire extinguisher, follow P-A-S-S:

- P** Pull (pin from extinguisher)
- A** Aim (extinguisher nozzle at fire)
- S** Squeeze (handle to activate extinguisher)
- S** Sweep (extinguisher output over base of fire/burning material)

In Case of Fire in the House Staff Quarters

1. Sound the alarm.
2. Evacuate the area, as necessary.
3. Dial the Fire Operator – ext. 46222 – give the exact location and nature of the fire.
4. Close all windows and doors.
5. Fight the fire with the proper fire extinguisher, if applicable (PASS).
6. Verify that no one remains sleeping in the area.

Fire Alarm Instructions for House Staff - Day

When the fire alarm sounds in the hospital during the day (7:30 am – 4:00 pm) and during the week (Monday through Friday), the following instructions will be carried out by the House Staff:

1. The members of the House Staff will remain in the area where they are on duty and aid in carrying out the fire plan in that area.
2. The members of the House Staff not on duty will report to Conference Room “A” (Cafeteria), ground floor, to await further instructions to aid in care and evacuation of patients should the need arise.

Fire Alarm Instructions for House Staff - Night

When the fire alarm sounds in the hospital during the night (4:00 pm – 7:30 am) or weekend (Saturday and Sunday), the following instructions will be carried out by the House Staff:

1. In the event evacuation of a patient unit is required, members of the House Staff will aid the Nursing Staff in the area of the fire in care of the patients and the evacuation of the patients as necessary.
2. The member of the House Staff assigned to the Emergency Department will remain in the Emergency Department only if patients occupy the area.
3. The members of the House Staff assigned to the Obstetrical Suite will remain in that area only if the area is occupied with patients.
4. The members of the House Staff engaged in a procedure in the Operating Room will remain in the Operating Room and continue the procedure as directed by the Senior Surgeon in the Operating Room.

Sounding of the Alarm

The fire alarm system will chime upon activation and announce the location of the fire. The telephone operator will also announce “CODE RED” and give the location of the fire.

“All Clear, Code Red” will be announced when the Akron Fire Department declares the fire extinguished and the area safe. You are to continue to carry out your fire plan assignment(s) until “All Clear, Code Red” is announced.

Chain of Command

The Fire Marshal for the Hospital is Mr. Joseph Plavecski (Facilities). Between the hours of 4:00 pm and 7:30 am, the Nursing Coordinator on duty in the hospital will be in charge at the scene of the fire. When the Akron Fire Department arrives, the designated fire officer will assume command and the resources of the hospital will be placed at his or her disposal and direction.

A fire manual is available on the Intranet. Please read it carefully and reread it occasionally. Fire drills are held at unannounced times. The participation of the medical staff is required by The Joint Commission, CMS, and the local authorities. It also establishes a good example for the reminder of the hospital staff.

<p>Participation in fire drills is a requirement of both the Joint Commission and local authorities.</p>

Mass Casualty Incident (Code Yellow)

You are vital in the Hospital’s Mass Casualty Incident (MCI) Plan for the effective handling of casualties in the event of a mass casualty incident in this or a neighboring community. The following material will give you a brief overview of the Akron General Medical Center Mass Casualty Incident (MCI) Plan. It is recommended that you review the complete document that your Program Director has on file. A copy of the complete document is also on file in the second floor Medical Library.

External/Internal MCI

The Mass Casualty Incident Plan or MCI is Akron General's response to a catastrophic event that occurs in the surrounding community or here within the hospital. The plan details how we will

provide or continue to provide the appropriate medical care to patients already here or those we are preparing to receive.

Dr. Minor - Level 1 involves 10 or less patients and no overhead page is made. The ED directs the MCI and will notify predetermined critical care areas by telephone requesting nursing assistance.

Dr. Minor - Level 2 is an event in which we will be receiving between 11-30 patients.

Dr. Major - Level 3 indicates we will be receiving greater than 31 patients but less than 100.

Dr. Major - Level 4 is instituted if we are expecting to receive greater than 100 patients.

Levels 2-4 will be announced by overhead page and page pre-selected physicians and staff members. An announcement of one of these levels also initiates your department specific plan. In addition to the four levels of the MCI, there are also three distinct phases -- Red, Yellow and Green:

Red Phase The ED is actively receiving and triaging critical patients.

Yellow Phase The ED continues to receive less critically injured patients but critical patients have been triaged and care plans initiated.

Green Phase The hospital and all departments can resume normal operations.

If you are off duty and are made aware of a catastrophic event in the community, stay at home. DO NOT CALL THE HOSPITAL! If you are needed, your supervisor or the Staffing Office will call requesting your assistance.

If you are called in, nursing personnel should park in the POB Deck and other personnel should park in their regular lots. However, if the areas are heavily congested, do not tie up traffic on Wabash Avenue. Park somewhere off campus and walk in. In order to gain access to the hospital, you must have your picture ID badge. If you have forgotten your badge, you must enter through the Main Entrance.

Please note that during the Red Phase, routine hospital operations will be curtailed and the following orders will be restricted:

1. X-ray is limited to two (2) views of the following:
 - Chest
 - LS spine
 - C-spine
 - Pelvis

The In-house designee in charge of Surgery, Critical Care Medicine, Emergency Medicine, or the Triage Physician Commander can only authorize variance. The Radiologist or his designate is to be notified of any variances.

2. Tests are limited to the following studies:

- CBC
- Profile 7
- CoHgb
- ABGs
- EKG
- Type and Screen, up to 4 units
- PT/PTT

The In-house designee in charge of Surgery, Critical Care Medicine, Emergency Medicine, or the Triage Physician Commander can only authorize a variance. The Department Chairman of Pathology or designate is to be notified of any variance.

3. Surgery is limited to repair of life- or limb-threatening conditions. Conditions that can be stabilized by non-surgical methods must not delay room turnover.

Physician Assignments

1. Physician Reporting Areas; report to area of specialty as follows:

- a. Emergency Medicine – Emergency Department
- b. Internal Medicine – Cardiac Cath Lab Ext.
- c. Surgeons (All Specialties) – Presurgical/PSU, 1-2 surgeons to ED triage
- d. Radiology – Radiology Department
- e. Family Practice – Cardiac Cath Lab Extension, ACC 3rd floor
- f. OB/GYN – Labor & Delivery
- g. Psychiatry – Psychiatric re-triage in 6007
- h. IM/Pediatrics – Cardiac Cath Lab Ext.
- i. Physicians without privileges – Medical Staff Office

2. Physician Disbursements

- a. ED Commander will assign physicians to Triage Area, ED or direct physician assistance in transporting of critical patients to other work areas.
- b. Medical Re-triage (Cardiac Cath Lab Ext.) Commander will assign physicians to Re-triage Team, patient care or as floor officers.
- c. Presurgical Commander will assign physicians to presurgical Re-triage Team, patient care or to Surgical suite.
- d. Radiology Commander will assign, as available, one radiologist to ED and one to Presurgical/PSU.
- e. Psychiatric Commander will assign psychiatrists and psychiatric staff to Main Lobby (Family Support Area), first floor Partial Hospitalization (Employee Stress Support Area), or Room 6007 (Psychiatric Patient Re-triage Area), 6100 Unit and 6400 Unit.

3. Description of In-House Medical Coverage During Plan Activation. Each medical House Officer responding to the Cardiac Cath Lab Extension Room who is assigned to cover the medical needs of the patients on the floor will:
 - a. Review patients with charge nurse/designated nurse and manage any pressing medical needs.
 - b. Develop a list of patients that could be considered potential discharges if beds are needed.
 - c. Review management problem and discharge list with Medical Re-triage Commander.
 - d. Make a reasonable effort to contact admitting physician.
 - e. Review surgical management problems with Surgical Commander.

There are numerous policies and procedures that go in place in the various levels and stages of an MCI. All residents must review the MCI policies found on the AGMC Intranet.

Flood (Code Noah)

Code Noah is an Administrative policy that will be announced via Telecom if the facility is experiencing a high level of excessive water (flood) or an unanticipated water event with the purpose of ensuring the safety of staff and patients while mitigating damage to the facility.

- Code Noah - When an AGMC employee has identified the presence of unanticipated water they will call Telecom requesting a Code Noah be called with the location of water.
- Code Noah Page- Telecom will send out a group page to the Code Noah call list.
- Supervision Response - Onsite Administrator will arrive onsite and identify two supervisory positions. Communications Lead and Facility Lead.
- Communications Lead- The purpose of this position is to handle all communications related to the flood (typically onsite administrator).
- Facility Lead- The purpose of the facility lead is to direct or engage in flood mitigation (typically facility management or onsite facility personnel).
- Clinical Response
 - Remove patients from the area that is affected by the flooding
 - Notify Telecom regarding the presence of unanticipated water in the area

Announced Autopsy

“Dr. Post, Dr. Mortimer Post, please.” This coded page indicated an autopsy is to begin immediately.

Physical Examination

A physical examination, including pre-employment drug testing, x-ray (if positive TB test in the past) and pertinent laboratory procedures, is required at the start of an appointment. This may include such procedures and/or immunizations as deemed appropriate by Cleveland Clinic Akron General to assure minimal health risk to the House Officer, other staff members, and patients. A copy of the mandatory policy entitled, “Substance Abuse for Employees with Individual Contracts,” (3.14) is on file in the Department of Medical Education.

As part of a fitness for duty evaluation, a Program Director may require a House Officer to submit to a physical exam, appropriate testing as well as psychiatric or psychological exam. Failure to complete may lead to dismissal from the Residency.

License / Training Certificate

It is mandatory that every House Officer without a permanent State of Ohio medical license obtain a training certificate from the State Medical Board of Ohio. Applications can be requested from the State Medical Board of Ohio (614-466-3934 or their web site at http://med.ohio.gov/practitioner_training_certificates.htm). The application fee is \$75, renewal fee \$35. Failure to have a current training certificate will be cause to remove House Officer from direct patient care responsibilities.

A training certificate shall be valid for one year but may, at the discretion of the Board, be renewed annually for a maximum of five years. Renewal applications are mailed approximately Feb 1st for those who initiated their training on July 1st the previous year. Others will receive their application accordingly. The fee for the renewal of a training certificate is currently \$35. Renewals are done online and require a credit card.

All House Officers are encouraged to apply for permanent licensure at the time of eligibility. The Ohio State Medical Board requires that the applicant personally request the application for permanent licensure and provide the necessary information and documentation. A copy of your permanent licensure must be provided to the Residency Coordinator, Resident Affairs, for inclusion in your permanent file.

DEA Number

A temporary DEA registration number will be assigned to you by the Pharmacy and can be obtained from the GME Coordinator. This DEA number is for training purposes only. A permanent DEA number can be applied for with your application for permanent licensure by calling 1-800-882-9539, or Internet site www.deadiversion.usdoj.gov.

Uniforms and Laundry

The official uniform for House Officers includes full-length white coat worn over trousers, shirt and tie; or skirt/slacks and blouse. The hospital will furnish white coats and launder them free of charge. White coats, as a minimum, must be laundered once a month. Scrubs are furnished by the hospital at no cost to the resident and remain the property of the hospital. All scrubs must be returned to Medical Education when the resident separates from employment with the hospital.

Once soiled, scrubs must be placed in the “dirty linen” container located in the 4th floor call quarters, the OR, or by the uniform room located in the basement directly across from the brown elevators. Scrubs should never be worn outside the hospital. Laundered uniforms can be picked up in the uniform room, OR, or 4th floor call quarters.

Secure VPN/RSA Token

You will be given a secure RSA token during orientation. If yours is lost or stolen a \$50 fee will be assessed to your payroll to cover the cost of a new one. To obtain a secure RSA token, please contact the Medical Education Department at 330-344-6050 or visit the Graduate Medical Education Coordinator.

Physician Portal

The Physician Portal is a web-based point of access to ChartMaxx, X-ray results, PACS, lab & transcription results, Surgery Schedule, on-line physician directory and more. You can access the Physician Portal from the hospital or by using a VPN connection from your home or office (RSA token is required).

To get to the portal, go to the Web address <http://my.agmc.org>. For questions, contact Akron General's Help Desk at 330-344-6604 or the Medical Education department at 330-344-6050.

Annual Employee Education

The Medical Center requires that all employees complete education annually in such areas as, but not limited to: Violence in the Workplace, Infant Abduction, Sexual Harassment, Billing Compliance, Infection Control and Isolation, Patient Confidentiality, Construction Safety, Blood borne Pathogen Safety, Tornado/Severe Weather, Substance Abuse, Tuberculosis (TB) Control, Electrical Safety, Bomb Threat, Preventing Sprains & Strain, Safe Use of Compressed Gas Cylinders, Phone Disruption, Fire Safety, External/Internal MCI, HIPAA, and Hazardous Materials. The Mandatory Training Steering Committee identifies the specific areas each year.

Akron General E-mail Access

All residents should access (i.e., read and respond) their assigned Akron General email account daily, but in no case less than once per week. Information of vital importance to residents and the residency programs is disseminated in this way and each resident is required to access it frequently.

Infection Control

The systems of isolation include Standard Precautions and five additional categories for higher levels of precautions. These systems are designed to protect patients and healthcare workers by reducing the risk of transmission of infectious agents in the hospital. Since patients with infections are not always identifiable, it is important to consistently use standard precautions with ALL patients.

Standard Precautions are driven by interactions with body substances, requiring barriers for all contact with body substances. Details of the systems are available in the Infection Control Manual on the Intranet (GenNet). Training in protection from blood borne pathogens is required for all House Officers on a yearly basis by federal law. Details of the regulation are in the Exposure Control Plan in the Safety Manual (also on the AGMC Intranet).

Guidelines for Use of Personal Protective Equipment (PPE)

- Wear gloves when there is a potential for contact with blood or body substances.
- Wear gloves when handling items or surfaces soiled with blood or body substances.
- Change gloves and perform hand hygiene between each patient contact.
- Wear gloves for all patient contact in critical care areas.
- Gowns and gloves are required for entry into a contact precautions room.
- Wash hands and other skin surfaces immediately and thoroughly if contaminated with blood or body substances.
- Hand hygiene is required upon patient room entry and exit. *Foam in, Foam out!*
- Wear gowns for procedures, which could generate splashes or lead to soiling of clothing with blood or body substances.
- Use face protection—goggles and masks, or face shields—for procedures in which there is a possibility of splashing, spattering or aerolization of blood or body substances.
- Use resuscitation masks when the need for mouth-to-mouth resuscitation arises.
- Send lab coats to the laundry frequently and whenever visibly soiled. Lab coats are your uniform and must be clean at all times.

Respiratory Protection for TB Control

Special masks, which are classified, as respirators, are required for persons entering a TB isolation room (Airborne Precautions). All House Officers must be cleared by Employee Health to wear a respirator and be fitted with a respirator. This is a federal requirement under the Respiratory Protection Policy. Fit testing is required yearly.

Hand Hygiene is an expectation before and after patient contact and after contact with equipment or the environment in the patient's room. Hand hygiene is required for patient room entry and exit. *Foam in, Foam out!*

Questions or concerns may be addressed to the Infection Control Practitioners at extension 46532 or pagers #1350, #1444, # 1833 and #1329.

Institutional Policy for House Officer Duty Hours in the Learning and Work Environment

This policy describes the institutional policy of Akron General Medical Center for monitoring of duty hours for all the residency programs it sponsors.

The ACGME standards emphasize the responsibilities of the programs, sponsoring institutions and the accrediting body relating to safe patient care and appropriate learning environment for House Officers. These areas must be addressed: (1) placing appropriate limits on duty hours, (2) promoting institutional oversight, (3) promoting and defining supervision and (4) fostering high-quality education and safe patient care, with House Officer involvement in hospital quality improvement and patient safety efforts.

“Duty hours” are defined as all clinical and academic activities related to the residency program i.e., patient care (inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent in-house and at-home during call activities, and scheduled academic activities such as conferences. Internal and external moonlighting is also part of duty hour requirements.

Program Requirement

Each residency program must establish formal written policies governing House Officer duty hours that are consistent with the institutional and program requirements. This policy will be communicated to the House Officer and faculty annually. It is the responsibility of the program director to monitor duty hours with sufficient frequency to ensure that the duty hour requirements are being met. Program directors are encouraged to utilize duty hour data from individual House Officers as part of the semi-annual evaluation process.

Institutional Oversight

Institutional oversight will be accomplished in two ways. The first is through the use of a hot line in which House Officers may report duty hour violations anonymously. The second method is through the year-end House Officer survey. On an annual basis, the Chair of the Graduate Medical Education Committee/Designated Institutional Officer will present data to the Graduate Medical Education Committee on all approved programs with respect to duty hour compliance.

Reporting

Annually, or upon request of the Graduate Medical Education Committee, each program director of an RRC-approved residency training program under the sponsorship of Akron General Medical Center will present a formal report to Graduate Medical Education Committee on their program compliance with both ACGME and RRC requirements as they relate to House Officer Duty Hours. The program director will describe the individual program policy of monitoring duty hours, how the duty hours are recorded and verified and how variances in the duty hours are addressed. A copy of their policy should be presented at this time.

The Graduate Medical Education Committee will review the data presented by the individual Program Directors and Designated Institutional Officer. Such data will be presented to the Department of Graduate Medical Education and the Research Committee of the Board of Directors and the Organized Medical Staff annually. The individual program policy should be approved at this time.

Violations

Repeated violations involving specific House Officers, rotations or programs will be evaluated by the Graduate Medical Education Committee on a semi-annual basis. If identification and education is ineffective, then House Officers that are consistently out of compliance will be required to appear before the Graduate Medical Education Committee and provide reasons for their non-compliance, as well as an action plan to ensure future compliance with these regulations.

Repeated violations by a House Officer will be cause for reprimand, probation or dismissal from the training program. Similarly, rotations with repeat violations will be subject to exclusion from the training programs.

Duty Hour Exception

Akron General Medical Center as a sponsoring institution fully supports the duty hour requirements as currently published. A petition from a program requesting greater than a ten-percent increase in duty hours exception is inconsistent with the published standards and will not be accepted for review by the Graduate Medical Education Committee.

Moonlighting

Moonlighting is neither encouraged nor required as a condition of employment as a member of the house staff at Akron General Medical Center and may be inconsistent with sufficient time for rest and restoration to promote the House Officer's educational experience and safe patient care.

In order to moonlight, a House Officer is required to obtain permission from his/her program director in the form of a prospective, written statement of permission that is made part of the House Officer's file.

House Officer acknowledges that their performance will be monitored for the effects of these activities and adverse effects may lead to withdrawal of permission. House Officer also acknowledges that internal moonlighting is subject to duty hour requirements and that external moonlighting is not subject to professional liability indemnification by Akron General Medical Center.

External sites that are not part of the Residency Training Program represent external, not internal moonlighting.

Sunlighting

Sunlighting (working for income during hours when an individual has duties and responsibilities to the service on which he/she is training) will NOT be permitted at any time. Any monies derived from teaching activities related to the Northeast Ohio Medical University (NEOMED), from any other required teaching activity, or from any income-producing activity as part of the residency program will be payable only to the respective department or House Staff Association and not to any individual or group of House Officers.

Rotation Schedule

House Officers are assigned to their duties and responsibilities by their Program Director and the Department of Medical Education in accordance with the educational requirements of the Accreditation Council on Graduate Medical Education (ACGME). Annually, a schedule of clinical rotations is prepared for each House Officer. The rotation schedule may be adjusted to meet individual needs or desires providing the residency program requirements are met. All changes in the rotation schedule must be requested in advance for review by the appropriate residency Program Director.

Any and all changes in regular assignments must have a written authorization from the Program Director and/or the House Officer's immediate clinical supervisor, and approved by the Department of Medical Education when appropriate. Request for change to the rotation schedule forms are available in the individual department.

On-Call Schedule

Call schedules are developed by each department on a monthly basis, usually two to four weeks in advance of the beginning of each month. Because of this advance scheduling, House Officers' vacation and conference requests are to be submitted in accordance with program specific policies, and at least six weeks in advance. See also the section on Vacations and Conferences.

Military Service

In the case of Military Reserve Duty, the stipend of the House Officer will be discontinued for the period of active duty. If the reserve pay is not commensurate with the Akron General Medical Center stipend, the difference between the Reserve pay and Akron General Medical Center stipend will be provided by the Medical Center.

Unscheduled Time Off

Any request for approval for unscheduled time off (time is considered “unscheduled” once the call schedule has been completed or six weeks prior to the time requested) must be submitted to the Program Director. The Program Director must be informed by the House Officer of the proposed arrangements for temporary coverage in their absence. Requests should be submitted as early as possible. Upon approval of the Program Director, the House Officer will inform the Department of Medical Education and the Chairman of any hospital department(s) which may be affected by the absence. Failure to comply with this protocol will be considered an unexcused absence.

Please see your program specific manual for specific regulations related to time off.

House Officer Responsibilities

Cleveland Clinic Akron General commits its resources to provide an excellent environment for its Graduate Medical Education Programs that meet the standards of the essentials of accredited residencies and Graduate Medical Education, established by the Accreditation Council for Graduate Medical Education (ACGME). In return for working in such an environment, House Officers are charged with the following responsibilities:

1. Develop personal programs of self-study and professional growth with guidance from the teaching staff;
2. Participate in safe, effective and compassionate patient care, under supervision, commensurate with their level of advancement and responsibility;
3. Participate in institutional programs and activities involving the Medical Staff and adhere to established practices, procedures and policies of the institution;
4. Participate and follow organizational utilization management protocols and policies, as well as quality of patient care, patient safety and service excellence policies and initiatives;
5. Participate completely in the educational and scholarly activities of their program and, as required, assume responsibility for teaching and supervising other House Officers and students;
6. Participate in educational endeavors, including institutional committees and councils, especially those related to quality patient care, patient safety and residency education efforts and activities;
7. Understand and abide by all institutional and program-defined duty hour requirements;
8. Participate in the evaluation of the quality of education provided by the hospital;
9. Develop an understanding of the ethical, socioeconomic, and medical/legal issues that affect Graduate Medical Education and of how to apply cost containment measures in the provision of patient care;
10. Serve as a positive role model for junior House Officers and medical students; and
11. Assist in recruiting new House Officers to the institution.

Performance and Decorum

The House Officer shall carry out educational and patient care assignments designated by the Chairman/Program Director of his/her specialty department.

The House Officer will perform all assignments in a manner consistent with the most current policies, rules and procedures delineated by the Board of Directors and the Medical Staff of Akron General Medical Center.

The House Officer will also conduct himself/herself in a professional, moral, and ethical manner commensurate with his/her status and obligation as a physician and according to all organizational policies.

The House Officer is always expected to maintain an appropriate and professional appearance. House Officers are expected to maintain appropriate and professional attire, and adhere to the hospital Dress Code Policy (HR policy #9.01). Appropriate attire for House Officers includes wearing professional attire or scrubs; a clean, white lab coat (provided by Akron General Medical Center); and their official hospital identification badge prominently displayed at all times. Individual departments may have additional dress code requirements, as does Children's Hospital Medical Center of Akron, where some House Officers occasionally serve. House Officers are required to meet all defined dress code requirements.

The House Officer shall demonstrate the attainment of the required skills commensurate with his/her level of training. The failure to observe or perform to the prescribed conduct and performance set forth herein may result in disciplinary action.

Smoking

According to Akron General Human Resources policy #9.04 Smoking/Tobacco, Akron General provides a safe and healthy tobacco-free environment for all staff and visitors. All House Officers are expected to abide by this policy.

Therefore, smoking or the use of any tobacco products is strictly **prohibited** on all Akron General Campuses including Akron General Medical Center, Edwin Shaw Rehab, Akron General Health & Wellness Centers and Akron General Health Centers. This policy applies to all persons including patients, visitors, employees, volunteers, physicians, House Officers, and all others on their grounds, including property regularly maintained by Akron General. This includes not smoking in a vehicle parked on these grounds. House Officers are prohibited from smoking or using tobacco products any time between start and end of their shift.

Effective January 1, 2009, Akron General will not hire anyone who smokes or uses tobacco. Former smokers and tobacco users must be free from use of any nicotine product for at least 90 days before being considered for employment. The pre-placement screening process will include a urine screen for cotinine, a metabolite of nicotine found in cigarette smoke.

If any person(s) is found violating the Smoke/Tobacco-Free Environment policy, staff is to courteously inform him/her that use of tobacco products is prohibited on the grounds. It is the responsibility of all staff to help enforce this policy. House Officers who violate the smoke/tobacco-free environment policy, are subject to progressive discipline.

Use of Personal Electronic Devices

House Officers are expected to abide by Akron General Human Resources policy #9.08 Use of Personal Electronic Devices and Personal Phone Calls. House Officers should review and be familiar with this policy which is located on the hospital's Intranet under the Human Resources policies section.

All personal electronic devices must be turned off in patient care and public areas. Unless required in the course of work, use of these devices is restricted to meal and break times. Personal cell phones are prohibited in hallways and main lobby of the facility or while providing care and/or services to a patient, residents, visitors, patient's families or other employees. The employee must be on break or lunch to use the cell phone and it must be in a designated area approved by supervision. Please reference Safety Policy SSP-18 – Cell Phone for additional information.

Any personal business that must be done during the regular business hours must be pre-arranged with the program's Chief Resident. All House Officers must be routinely available to the Medical Center by telephone. House Officers must report their telephone numbers, and any changes to the GME Coordinator, who will notify the Department of Human Resources and the telephone operators in the Department of Telecommunications.

Questions, Concerns and Complaints

It is the policy of Cleveland Clinic Akron General, including its Department of Medical Education, that positive employee relations and morale can be promoted through open communication. Cleveland Clinic Akron General encourages House Officers to express their questions, and report their concerns or make complaints, without fear of retribution or retaliation.

Questions, concerns or complaints about the Program or Program personnel may be directed, as appropriate, to the Program Director, to the Chairman of Medical Education and Research, to the Human Resources Department of Cleveland Clinic Akron General, or to their respective staffs. Questions, concerns or complaints may be expressed verbally in person, by telephone, email, or in writing.

Questions or concerns about quality patient care or safety may be made by calling the Safety Hot Line at (330) 344-7901 or calling extension 81628.

Questions or concerns about compliance can be made by calling Corporate Compliance Officer at extension 44032.

Questions or concerns about HIPAA violations can be made by calling the HIPAA hotline at (330) 344-4722 or emailing the privacy officer at privacyofficer@akrongeneral.org.

Questions or concerns about harassment, sexual harassment or misconduct, discrimination or alcohol/substance abuse may be directed to the Cleveland Clinic Akron General Human Resources Department.

It is Akron General's intent to address, respond, and resolve promptly, appropriately, and formally or informally, as circumstances warrant.

Code of Conduct

House Officers must comply with the Cleveland Clinic Akron General Standards of Conduct, Code of Conduct, and Conflict of Interest policies that are accessible on the Akron General Medical Center Intranet (<http://my.agmc.org>) and are incorporated by reference into this House Officer Manual. You may also request a written copy of these policies.

House Officers are expected to speak, act, appear, perform, and dress in a manner consistent with their status as a physician, both within the hospital and when representing the hospital at any public functions. Program Directors have the authority to impose disciplinary action, including immediate disciplinary action, when warranted by circumstances, for a House Officer's violation of Standards of Conduct, Code of Conduct, or Conflict of Interest policies, disruptive actions, unprofessional or behavior, inappropriate dress, or other conduct unbecoming of a House Officer.

Disciplinary action also may be taken against a House Officer for academic dishonesty, breach of medical ethics, scientific misconduct, failure to fulfill the duties and responsibilities of a House Officer, or any act or omission deemed dangerous or negligent regarding patient care, or posing an actual or potential risk to colleagues, staff, patients, patient families, or to the public.

Disciplinary actions at Level 3 or higher taken against a House Officer will become part of the House Officer's permanent record. Accessibility to, and disclosure, of disciplinary actions at Level 3 or above will be subject to applicable state and federal law.

Sexual Harassment

Cleveland Clinic Akron General will not permit sexual harassment in any form to be engaged in at this facility. Sexual harassment includes unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a nature where submission to the conduct is an explicit or implicit term of condition of the job, is used as a basis for employment decisions, interferes with work performance, or creates an unfavorable working environment.

An employee having knowledge of any alleged sexual harassment is to report it to their supervisor and/or the Department of Human Resources. Such reports will be held in confidence and the employee will be protected from harassment or retaliation for reporting such conduct.

Any employee who engages in any type of sexual harassment will be subject to discipline up to and including discharge, depending on the severity of the offense. Any employee who is aware of a person who engages in sexual harassment and fails to report it will be subject to discipline.

Akron General strives to ensure that the work environment is always focused on patient care and education. A hostile environment will not be tolerated. A hostile environment is defined as offensive conduct relative to an employee's gender that a reasonable man or woman should not have to endure, or the victim's subjective perception would find the work environment hostile or abusive.

A QA hotline is available for House Officers to report any concerns regarding instances of unprofessional behavior (House Officer to House Officer, attending physician to House Officer, House Officer to student, etc.) or patient care (quality) issues. Call extension 81628.

Promotion or Non-Renewal of House Officer Contract

General Performance of House Officers

The House Officer shall carry out educational and patient care assignments designated by the Chairman/Program Director of his/her specialty department. The House Officer will perform all assignments in a manner consistent with the most current policies, rules and procedures delineated by the Board of Directors and the Medical Staff of Akron General Medical Center. The House Officer shall demonstrate the attainment of the required skills appropriate for his/her level of training. Failure to comply with the prescribed conduct and performance set forth herein may result in verbal notice or warning, written warning or reprimand, probation, remediation, suspension, non-renewal of contract, or termination and dismissal from the program.

Promotion of House Officer

The House Officer must demonstrate progress toward the goals of clinical competence in the six core competencies, cognitive achievement, and accumulation of a fund of knowledge commensurate with physicians certified by the respective specialty Board. A House Officer will be evaluated, at least, semi-annually by the faculty and/or Program Director. Each of these written summary evaluations will become part of the House Officer's permanent file. Accessibility and disclosure will be subject to applicable State and Federal law.

Probation or Remediation

When a House Officer functions below the level of appropriate performance, the House Officer may be placed on probation for a period of time to be determined by the Program Director, but not to exceed a cumulative six months during the House Officer's residency.

A House Officer also may be placed in remediation, which differs from probation and does not have any maximum duration.

The reasons for probation and/or remediation, as well as the specific deficiencies, and reformation expected, will be identified and reported to the House Officer and the Department of Medical Education.

At the conclusion of the period of probation and/or remediation, the House Officer will be re-evaluated by the Program Director. The Program Director may recommend: (1) an end of probation and/or remediation due to resolution of the deficiencies; (2) continuation or extension of probation, but not to exceed a cumulative six months during the House Officer's residency, and/or continuation of remediation; or (3) non-renewal or termination of the contract of the House Officer.

Non-Renewal

Akron General Medical Center, if practical, will endeavor to provide written notice of intent not to renew a House Officer's contract no later than four months prior to the end of the House Officer's current contract. If the primary reason for nonrenewal occurs within the four months prior to the end of the contract, Akron General Medical Center will provide as much written notice of the intent not to renew as the circumstances will reasonably allow, prior to the end of the contract. This provision does not apply to a House Officer who is in his/her anticipated graduation year.

The Department of Medical Education will be notified of the results and details of the re-evaluation and of any further action instituted by the Department Program Director.

USMLE / COMLEX Requirements

This chapter provides the policy for the United States Medical Licensing Examination (USMLE) and Comprehensive Osteopathic Medical Licensing Examination (COMLEX) requirements for all Akron General Medical Center Residency Programs.

Purpose

The purpose of this policy is to define and standardize the USMLE/COMLEX requirements for all House Officers in Akron General Residency Programs, and to require House Officers to meet national quality standards and benchmarks in preparation for Medical Licensure and Certification by the American Board of Medical Specialties.

Policy

It is the policy of Akron General Medical Center Department of Medical Education that each House Officer shall pass the United States Medical Licensing Examination (USMLE) Part 3 or applicable Comprehensive Osteopathic Medical Licensing Examination - COMLEX Level 3 before beginning their PGY-3 year. House Officers must fulfill this requirement in order to be considered in academic good standing to be promoted to the next level of training and as an essential element of completing a residency program and receiving an Akron General or NEOMEDP Residency Completion Certificate (diploma).

- A. In order to be offered a PGY-3 contract a PGY-2 must:
 - a. Sit for the USMLE Step 3 or COMLEX Level 3 exam by December 31st of his/her PGY-2 year and;
 - b. Pass the USMLE Step 3 or COMLEX Level 3 exam by February 28th of his/her PGY-2 year.Deadline dates for House Officers who are off cycle will be determined by their contract dates.
- B. In the case of a House Officer who has not passed either exam by February 28th of his/her PGY-2 year, a Program Director may choose:
 - a. To notify that House Officer in writing that their contract will not be renewed.
 - b. Hold that position vacant to allow the House Officer to pass the exam before July 1st of their PGY-3 year.
- C. No House Officer shall receive a PGY-3 contract without successful completion of either the Step 3 or COMLEX 3 exam.
- D. Any exception to this policy must be approved in writing by the House Officer's Program Director and Chairman of Medical Education and Research, and reported to the Graduate Medical Education Committee.

- E. House Officers or Fellows above the PGY-3 level being considered for advanced placement in Residency or Fellowship Training at Akron General or another ACGME or non-ACGME program must have completed a pathway that makes them fully eligible for medical licensure in the United States
- F. Passage of Step 3 is required for all International Medical Graduates wishing to obtain a H1B Visa Status.

Procedure

- 1. House Officer shall:
 - a. Accept responsibility for application, fees and scheduling of USMLE/COMLEX examinations to be in compliance with this Policy. House Officer shall present USMLE/COMLEX scores to Program and the Medical Education Department for inclusion in House Officer's Official Residency File.
 - Educational allowance can be used for this, subject to the requirements of the Resident Educational Expense Reimbursement policy (Appendix B) and each resident's defined contractual educational allowance.
 - b. Review USMLE/COMLEX status with Program Director/Faculty Advisor during biannual reviews.
- 2. Program Director shall:
 - a. Track the USMLE/COMLEX status of House Officers in New Innovations as well as applicants to the program.
 - b. Inform House Officers in writing of this policy and include the policy in the Program's House Staff manual.
 - c. Inform Faculty and Faculty Advisors of the Policy.
- 3. Department of Medical Education shall:
 - a. Review all Residency Programs for compliance with this policy.
 - b. Oversee any appeal as outlined in the House Officer Manual.
 - c. Define policy in the House Officer Manual.

Guidelines for House Officer Remediation and Disciplinary Action

The goal of Graduate Medical Education programs is to educate House Officers in their selected specialties so that they can perform independently as clinically competent physicians after graduation. The purpose of these Guidelines is to identify situations, including (but not limited to) poor academic performance, lack of professionalism or interpersonal communication skills, inappropriate conduct, or failure to demonstrate peer level achievement of the six core competencies, and to initiate remedial or disciplinary action that is fair, consistent, and appropriate with the intent, if possible, to remediate behavior and improve clinical or academic performance.

Remedial or disciplinary action aims to identify, address and attempt to remediate or improve clinical and academic performance and/or professional behavior. While desirable to attempt progressive disciplinary or remedial action, if reasonably practical, a stepped approach is not mandated.

Guidelines

The following levels are intended as Guidelines only. Any level may be skipped, accelerated, combined, or otherwise modified, depending on circumstances:

Verbal notice or warning (Level 1) is appropriate when an academic, clinical or behavioral deficiency is identified. The Program Director will review the verbal notice or warning with the House Officer. A verbal notice or warning does not need to be documented in the House Officer's file, but the Program Director may keep a record by internal memorandum or otherwise of verbal notices or warnings. A verbal notice or warning is not eligible for Reconsideration or Internal Review Appeal.

Written warning or reprimand (Level 2) is appropriate in circumstances when a deficiency identified through a verbal notice or warning has not been corrected, or if a more serious academic, clinical or behavioral deficiency occurs. The Program Director will review with the House Officer the deficiency that prompted the written warning or reprimand, as well as the substance of the written warning or reprimand. The Program Director should explain to the House Officer disciplinary or remedial action options, including (but not limited to) probation, remediation, suspension or non-renewal of the House Officer Contract, if the deficiency continues or is unresolved. The written warning or reprimand will be documented in the House Officer's file, but the House Officer may or may not be given a copy of the written warning or

reprimand. A written warning or reprimand is eligible for Reconsideration but is not eligible for Internal Review Appeal.

Probation (Level 3) is appropriate if there is no or non-satisfactory improvement in deficiencies cited in the written warning or reprimand and/or if additional deficiencies are identified. The House Officer may continue to work during probation, but probation is limited to a cumulative maximum of six months over the course of the residency. A House Officer who is on probation may not advance to the next PGY level unless approved by the Program Director and Chairman of the Department of Medical Education & Research. The Program Director will meet with the affected House Officer to explain Probation, establish goals for ending Probation, and describe the consequences if the House Officer fails to demonstrate improvement necessary to get out of Probation. Probation is eligible for Reconsideration and Internal Review Appeal.

Suspension or Involuntary Leave of Absence (Level 3) is appropriate where there are serious issues, including (but not limited to) patient safety and/or potential harm to self or others, and/or serious disruption to the Program, or during the pendency of an Internal Review Appeal when termination has been recommended. It is permissible to impose suspension immediately, where warranted, without first going through other Levels. During suspension, the House Officer is relieved of all Program responsibilities and is denied physical and electronic access to the facilities. Suspension or Involuntary Leave of Absence is eligible for Reconsideration and Internal Review Appeal.

Termination of House Officer Contract for Cause or Dismissal from the Program (Level 4) is appropriate when serious academic and/or behavior deficiencies or problems (including, without limitation failure to satisfy core competencies) exist despite previous remedial and/or disciplinary efforts. Termination or Dismissal is eligible for Reconsideration and Internal Review.

Alternative Actions

Voluntary Leave of Absence (LOA) - A House Officer may request a voluntary Leave of Absence (LOA) for personal reasons or to complete treatment for a medical or mental health condition.

Remediation - Remediation differs from probation and is designed to address through educational means identified clinical and/or academic deficiencies. The goal of remediation is to improve competence and academic performance. There is no maximum time limit in which a House Officer may remain in remediation. The Program Director has the option either to create a written remediation plan or to document in the House Officer's file the deficiencies identified for remediation. A House Officer who is placed in remediation may request reconsideration, but remediation is not eligible for Internal Review Appeal.

Program Director Authority and Responsibility

The Program Director has the authority and responsibility to recommend or impose appropriate disciplinary or remedial action involving House Officers under his/her direction, subject to review by the Chairman of the Department of Medical Education and Research.

At the time of a written warning or reprimand, probation, suspension, or remediation, the Program Director should outline in writing the following:

1. Conduct and/or Performance issues and expectations;
2. Timeframe to reassess;
3. How will assessment occur, including tools, methods or processes to be used.
4. Criteria determining success; and
5. Consequences of House Officer's failure to satisfy or comply.

The Program Director will review with the House Officer the reasons for a written warning or reprimand (Level 2) or the terms and expectations involved in remediation. The Program Director has the discretion either to have the House Officer sign a written warning or reprimand or remediation or prepare a memo for the House Officer's Program file indicating that the Program Director had reviewed the reasons or terms, as applicable.

In the case of probation, suspension or termination (Level 3 or Level 4), the Program Director will review with the House Officer a summary, which the House Officer will be asked to read and sign, verifying that he/she has met and reviewed the subject disciplinary action with the Program Director. Signing does not necessarily indicate the House Officer's agreement with the recommended or imposed action. The Program Director will note if the House Officer refuses to sign the summary, which will be included in the House Officer's Program file.

A copy of pertinent documentation regarding the House Officer in connection with a Level 3 or Level 4 disciplinary action or remediation will be sent to the Department of Medical Education & Research in a timely fashion. Executive summaries are encouraged. A House Officer may provide a written response to any Level 3 or Level 4 disciplinary action.

LOA and Academic Training

Akron General Medical Center as a sponsoring institution for a number of residency programs recognizes that during the course of training, House Officers may need to utilize one or more leaves of absence (LOA). Salary, length of time off, continuation of fringe benefits and other employee benefits are described in policies established by the Human Resources Department of Akron General Medical Center. (<http://my.agmc.org>; section 10.01) Extended or multiple LOAs can detract from the training of a House Officer and may prolong the period of training.

The Program Director is uniquely suited to determine whether additional training is required when a House Officer requests a LOA. If possible the House Officer will meet with the Program Director before a LOA to determine whether the LOA will require additional training past the expected date of graduation of the House Officer. The determination of such additional training will be based on the Program Director's knowledge of the House Officer's current or anticipated educational deficiencies, ability to replace the missed training during their residency program, evaluations from peers and faculty members of past and current educational performance and when necessary, discussions with the individual RRC representative and Chairman of Medical Education and Research.

Any House Officer requiring extended training after their scheduled graduation date must be approved by the Chairman of Medical Education and Research.

Continuation of benefits past the expected date of graduation will be at the same postgraduate training level.

Policy for Reconsideration and Internal Review Appeal

Recommendations or Actions Eligible for Reconsiderations Only

A House Officer may request Reconsideration of a written warning or reprimand (Level 2), or recommended remediation. A House Officer may mail or deliver in person a written request for Reconsideration to the Chairman of the Department of Medical Education and Research within seven calendar days of the recommended or imposed action. The Chairman promptly will review the request for Reconsideration with the Program Director who recommended or imposed it. The Chairman will affirm, overrule, modify or otherwise attempt to resolve any disagreement about the action by other appropriate means. The Chairman will notify the House Officer in writing of the disposition of the recommended or imposed action, which will be binding and final without further review or Internal Review Appeal.

Recommendations or Actions Eligible for Reconsideration and Internal Review Appeal

A House Officer has the right to request Reconsideration of any recommended or imposed adverse action that could result in dismissal or significantly threaten the House Officer's career development, including (but not limited to) probation (Level 3), suspension (Level 3), termination/dismissal (Level 4) from the program, or non-renewal of the House Officer Contract for performance reasons. The House Officer must request Reconsideration in writing, which must be mailed or delivered in person to the Chairman of the Department of Medical Education and Research within seven calendar days of the recommended or imposed action.

The Chairman and the Program Director, who recommended or imposed the action, promptly will meet to review and reconsider the action. The Chairman will affirm, overrule, modify or otherwise attempt to resolve any disagreement regarding the adverse action by other appropriate means. The Chairman will notify the House Officer in writing, in person, or by certified mail (return receipt requested) of the disposition of the recommended or imposed adverse action.

If the Chairman's decision is to uphold the recommended or imposed appealable action, or modify it in such a way that it still threatens the House Officer's career development, the House Officer may request in writing an Internal Review Appeal within seven calendar days from the date the House Officer receives notification from the Chairman.

Internal Review Appeal Panel

The Internal Review Appeal will be heard by an Internal Review Appeal Panel of five persons consisting of the following:

- Three current or past members of the Graduate Medical Education Committee selected by the Chairman of the Department of Medical Education & Research (none of whom were involved in taking the adverse action against the House Officer);
- The President or other officer of the House Staff Association; and
- The Senior Vice President, Medical Affairs or his/her designee.

The Chairman of Medical Education and Research shall preside at the Internal Review Appeal proceedings to maintain order and decorum. The Internal Review Appeal Panel is a “peer review” committee as defined by Ohio Revised Code, Section 2305.25.

Scheduling the Internal Review Appeal

The Internal Review Appeal proceedings will be held as promptly as mutually convenient and reasonably practical, but no later than thirty (30) calendar days from the date the House Officer’s written request for an Internal Review Appeal is received by the Chairman.

Internal Review Appeal Process

The Internal Review Appeal of the recommended or imposed adverse action, which involves the competency and/or professional conduct of the House Officer, is a peer review proceeding, as defined by Ohio Revised Code, Section 2305.251. The Internal Review Appeal proceedings, and those participating in them, are entitled to all protection and privileges afforded by Ohio Revised Code, Section 2305.251 and 2305.252.

An Internal Review Appeal is not the same as court hearing or a “hearing,” as that term is used in the Medical Staff Bylaws. An Internal Review Appeal does not give the House Officer the right to conduct formal discovery or to compel the attendance of any person as a witness. The House Officer may review and receive a copy of his/her residency Program and Medical Education files within seven days after making a written request. The House Officer may review, but not copy, any other document the Program Director is relying upon for making the recommendation or imposing the action. The review may take place at the Internal Review Appeal proceedings. The parties are encouraged to share in advance the names of persons who may speak on their behalf at the Internal Review Appeal proceedings in order to maximize the effective use of time allotted for the Internal Review Appeal. Neither the House Officer nor the Program Director who recommended or imposed the appealable adverse action shall be represented by an attorney at the Internal Review Appeal proceedings. The House Officer or Program Director may request other House Officers or active members of the medical staff to assist at the proceedings. Neither side is bound by the rules of evidence. The Chairman will have the discretionary right to exercise reasonable control over the proceedings regarding relevancy and appropriateness of written or oral testimony, including the discretionary right to limit or preclude scurrilous or irrelevant testimony or documents.

Both sides will have an equal opportunity to present their respective positions. Both sides will have an equal opportunity at the beginning of the proceedings to review all documents and

written information that the other intends to present. The Program Director who recommended or imposed the appealable adverse action will present first. The House Officer will then present his/her position. Both parties will be allotted equal time to give written and oral testimony and produce witnesses on their respective behalves. Both parties will be able to ask the other questions. Members of the Internal Review Appeal Panel and the Chairman may ask questions of either party at any time. Generally, an Internal Review Appeal proceeding will be completed within three hours, though the Internal Review Appeal Panel may agree to extend the time for good cause. A stenographic record of the proceedings will be taken, but that record is privileged under Ohio Revised Code, Section 2305.252. The House Officer is not entitled to a copy of the stenographic record.

Objective and Standard of Review

The objective of the Internal Review Appeal is to gather information in order for the Internal Review Appeal Panel to determine the fairness of the recommended or imposed adverse action. The Internal Review Appeal Panel may affirm, reverse, or modify the recommended or imposed action. The burden is on the House Officer to prove by the greater weight of credible evidence that the recommended or adverse action was arbitrary, capricious, or not reasonably supportable. If the House Officer cannot meet this burden, the Internal Review Appeal Panel must uphold the action.

Timing of Final Decision

The Internal Review Appeal Panel may begin its deliberations following the dismissal of the parties immediately after the proceedings, or within a reasonable time thereafter. As soon as reasonably practical, but no longer than 30 days following the Internal Review Appeal proceedings, the Internal Review Appeal Panel will render a written decision, which will be final and binding upon all parties with no further right of appeal. Written notice of the decision will be provided to the involved parties. The written decisions will become part of the House Officer's permanent record. Access to, and disclosure of, this record is subject to State and Federal law.

Medical, Dental, Disability and Life Insurance

Excellent benefit plans are available to House Officers and their eligible dependents (spouses and children only).

Akron General Medical Center offers “Flexible Resources,” a flexible benefits program which allows you to design your own personal benefits program by choosing various options of health, life insurance and flexible spending accounts. House Officers are initially eligible on July 1 (medical policy being effective the first day of orientation). Open enrollment is conducted once each year during October with changes effective each January 1.

Health Insurance

House Officers have access to excellent medical coverage to meet individual and family needs, delivered through a PPO plan. A Consumer Driven Health Plan with a Health Savings Account is also available. The PPO medical plan offers no out-of-pocket co-pays or deductibles when a House Officer, and family members, have inpatient or outpatient procedures performed at the following locations: Cleveland Clinic Akron General, Akron General Health and Wellness Centers, Akron Children’s Hospital, Edwin Shaw Rehab, and Lodi Community Hospital.

The PPO plan includes a pharmacy benefit and House Officers can take advantage of many perks such as payroll deduction, lower co-pays, discounted maintenance medications, and over-the-counter products when utilizing Akron General’s outpatient pharmacy. Coverage is also available at most retail pharmacies. Co-pays for the Akron General Outpatient Pharmacy are \$10 (or cost of the drug if less) for generics that cost less than \$50, 20% for Tier 1 drugs and 35% for Tier 2 and specialty drugs (minimum and maximums apply). Co-pays at retail network pharmacies are 30% for Tier 1 drugs and 50% for Tier 2 drugs (minimum and maximums apply). 90–Day maintenance drug fills are available at Akron General Outpatient pharmacy at a reduced copay. Generic will be used when available. If brand is selected when a generic is available, the employee is responsible for the balance of the cost over the brand co-pay.

The House Officer Prescription Policy Must be Followed

- All prescriptions must bear the signature and personal DEA number of an attending physician.
- Any prescription for a House Officer and/or his/her family member must be written by an attending physician; that is, by a physician who has completed his/her residency training;
- It is strongly discouraged for a House Officer to write a prescription for an employee.

Failure to comply with this policy will result in written warning, suspension, and possible termination of the House Officer’s contract.

Dental Insurance

Akron General offers dental coverage to help with the costs of routine dental care, major dentistry and orthodontics. The coverage offers 2 free cleaning and exams per year (up to the usual and customary amount). Using a network dentist is not required but could result in lower out of pocket costs.

Vision Coverage under Medical Plan

An eye exam every 24 months is covered by Akron General's medical insurance plan.

Vision Plan Option

The Vision plan is voluntary, paid for by the House Officer, and provided by EyeMed and offers coverage for yearly eye exams, allowances for frames and lenses, allowances for contact lenses, and other eye care services.

Flexible Spending Accounts

Contributions to Health Care or Dependent Care Flexible Spending Accounts (FSA) help you save for medical or daycare expenses. These tax-free contributions could result in significant tax savings. Use the Stored Value Card (debit card) provided to pay at point-of-purchase for convenience.

Life Insurance

Akron General offers term life insurance coverage at no cost to you. Coverage equals 1 x annual salary, limited to \$50,000. You may elect additional coverage up to a maximum of 5 x annual salary.

Dependent Life Insurance

You may elect dependent life insurance for your spouse and each dependent child.

Disability Insurance

Group LTD benefit is provided at 60% and becomes payable 90 days after the onset of an approved illness or injury.

Retirement

Akron General offers a 401k plan to House Officers. You will be automatically enrolled, and will receive the employer match after completing one year of service with 1000 hours worked. The match is 100% on the first 3% of contributions and then 50% for the next 2% contributions, up to a total of a 4% match for a 5% employee contribution. You may opt out of this benefit if you do not wish to participate.

Financial Counselors are available to answer employee questions and concerns regarding retirement and financial goals.

Voluntary Benefits

Available through payroll deduction, you may choose policies such as Auto and Home insurance, Prepaid Legal, Pet Insurance, Critical Illness and Whole Life insurances.

Adoption Assistance

All full-time and semi-fulltime employees with at least one year of service are eligible to receive paid time off and reimbursement on expenses related to adoption.

Sick Leave

Each House Officer will be allowed excused absence during each academic year. The amount of absence allowed is based upon your level of training (see below). In such an event, the training period may need to be extended to enable you the ability to fulfill the requirements of your Department, specialty Board or State licensing Board. During each academic year, the payment of stipends and perquisites during excused absence will remain in effect for the following designated periods:

First year level of training	4 weeks
Second year level of training	5 weeks
Third year level of training	6 weeks
Fourth year level of training	7 weeks
Fifth year level of training	8 weeks
Sixth year level of training	8 weeks

Pregnancy leave shall be granted consisting of paid sick time followed by all other unused paid time. The leave of absence is not to exceed four (4) months combined paid and unpaid time for the initial date of disability due to pregnancy. The Human Resources Policy Manual should be consulted for the entire Leave of Absence Policy (10.01) and Family Medical Leave Act (10.01).

Family Medical Leave (FMLA)

The Family Medical Leave Act provides up to twelve weeks of leave to an eligible employee for his/her serious health condition or that of a spouse, child or parent, or for the birth of a child or placement for adoption or foster care of a child. Employees are eligible if they have worked for the Medical Center for at least one year and for at least 1250 hours during the past year.

To obtain approved FMLA leave, eligible employees are required to provide advance notice and have a physician certification completed and returned to Akron General. You must provide thirty (30) days advance notice when the leave is foreseeable. We require medical certification to support a request for a leave because a serious health condition may require a second or third medical opinion at our expense. For the duration of an approved Family Medical Leave, Akron General will maintain your health coverage under our group health plan provided you continue to pay your portion of the insurance premiums. If you wish to determine if you are eligible for an approved FMLA leave or to obtain more information about such leave, contact your director, Human Resources Policy 10.01 or the Human Resources Department. FMLA questions may be directed to Human Resources at 330-344-7632.

The Benefits Hotline at 330-344-6092 can answer other questions about your benefits.

Vacations

All House Officers are entitled to three (3) weeks (i.e., 15 days excluding Saturday and Sunday) PTO (personal time off) during each academic year. PTO time cannot be applied from one academic year to the next. Failure to take one's allotted PTO time will not result in additional remuneration.

Furthermore, unused vacation time will not be paid upon completion of training and/or upon termination of employment. House Officers are encouraged to fully utilize this benefit during the academic year it is provided.

Leaving before the completion of an academic year disqualifies the House Officer from vacation and conference time.

A "Request for Excused Absence" form may be obtained from your Department. This form must be signed by the Chief Resident of the service to which you are assigned and your Chief Resident and Program Director and returned to your Department.

This form must be signed in advance of all PTO by all of the following individuals:

1. Chief Resident of the service on which you are rotating during the time of your requested vacation;
2. Chief Resident of your Training Program;
3. Program Director of your Training Program;
4. Home Training Program will forward request to the Rotating Service Department for approval.

All PTO must be approved by all parties in advance of taking PTO. If a vacation request is denied, notification must be made to the House Officer and their home Training Program's Chief Resident.

No PTO may be taken without the Program Directors approval:

1. Between June 15 and July 15, and
2. While on rotation at Children's Hospital, unless arranged with your Program Director prior to June 15 of each academic year.

Program Directors retain the authority to review and recommend whether a House Officer is approved for PTO. House Officers should not make any travel plans until they have received approved PTO from all necessary parties.

Unused PTO time will not be paid out upon completion of training, and/or upon termination of employment. House Officers are encouraged to fully utilize this PTO benefit during the academic year it is provided.

Training Outside of Affiliated Institutions

Purpose

The purpose of this policy is to define the policies and procedures necessary to schedule and perform an away rotation. This policy is meant to protect both the Institution and the individual House Officer from any potential legal, academic, accreditation, or ethical problems related to the performance of away rotations. This policy is in accordance with the ACGME and internal Cleveland Clinic Akron General requirements.

Focus

All elective House Officer training outside of Akron General Medical Center.

Goals

The goals of any elective should be to secure additional educational training, not available through Cleveland Clinic Akron General or the NEOMED consortium hospitals, for humanitarian reasons or to obtain exposure to potential post-graduation practice opportunities.

Policy

When House Officer education occurs at a non-Cleveland Clinic Akron General institution or site, Cleveland Clinic Akron General continues to have responsibility for the quality and appropriateness of that educational experience and must retain authority and oversight for the House Officer's activities.

Definitions

For the purpose of this policy, an away elective is defined as a clinical rotation that is at an institution (i.e., hospital) or practice site which:

- Does not currently have a signed training agreement or affiliation agreement with Cleveland Clinic Akron General, or
- Is not currently a participating institution for that particular residency program and
- Is outside the NEOMED consortium geographic region.

Criteria for Approval

The following may be used to determine approval or disapproval of an elective request.

- House Officer is in good standing with program and institutional requirements.
- Experience not available at Akron General Medical Center/NEOMED consortium
- Provides a unique educational opportunity specific to educational goal
- Potential value to Akron General Medical Center
- Enhances fellowship or practice opportunities
- Is humanitarian
- Not high risk

- Approved by Risk Management

Procedure

Prior to arranging an away rotation the following steps must occur:

1. The House Officer must make a formal request in writing to the Program Director to obtain permission for the away rotation. This request must be made at least 120 days before the beginning of the rotation.
2. These rotations must be approved in writing first by their Program Director, then the Chairman of Medical Education & Research. A copy of the approval will be kept in the House Officer's academic file in the Medical Education office.
3. Once approved, the program should contact the Medical Education office as soon as possible so that preparation of a training agreement or affiliation agreement between the away rotation site and the Institution can begin in a timely manner.
4. A completed Away Elective form to include the following information should be provided to the Medical Education office:
 - a. Date and location of the rotation
 - b. Specific learning objectives/goals for the rotation
 - c. How these objectives will be accomplished
 - d. Proposed schedule
 - e. Method of evaluating performance
 - f. All clinical locations involved in the training
 - g. Scope of anticipated activities such as surgery (types), procedures, direct patient care, and research.
 - h. The name, contact information of the educational preceptor assuming oversight of the Akron General Medical Center House Officer at the away site.
5. Once approved, Cleveland Clinic Akron General agrees to provide the following:
 - a. Malpractice coverage: Malpractice coverage provided by Akron General Medical Center for House Officers is effective only within the scope of the clinical activities as defined in the training or affiliation agreement.
 - b. House Staff Stipend: For the period of the away rotation, Akron General Medical Center will continue to provide full stipend and benefits as stipulated in the House Officer contract.
 - c. Each away rotation must be accompanied by an appropriate teaching agreement or affiliation agreement that is executed by Akron General Medical Center and the away rotation site. This site can be a hospital, private practice office, or any other clinical entity. The Medical Education office will be responsible for drafting and maintaining these agreements. Programs may request copies of the signed agreements.

6. Caveats:

- a. Medical License: Medical licensure is done on a state-by-state basis. If the away rotation is out-of-state, it is the responsibility of the House Officer to understand and follow the applicable state licensure rules for House Officers in Graduate Medical Education programs in that state. Many states will require a training certificate to be issued by the state medical board prior to commencing any clinical activity.
- b. Risk Management. Since Akron General Medical Center assumes malpractice coverage for all approved residency rotations (including outside electives), the Chairman of Medical Education and Research and/or the House Officer program director may request review of the proposed scope of clinical activities of the House Officer on elective by Akron General Medical Center Risk Management prior to final authorization of the elective.

House Officer Impairment

Purpose

The purpose of this policy is to provide a drug free, healthful, safe and secure work and training environment.

Focus

House Officers conducting clinical, educational or research activities at Akron General Medical Center.

Definitions

“Impairment” is a physical or mental condition, which causes a physician to be unable to practice medicine with reasonable care and safety commensurate with his/her level of training or participate in the residency training program as a learner.

“EAP” is an Employee Assistance Plan.

“Program Director” is the House Officer’s immediate supervisor, the Director of any of the AGMC Residency Programs.

Overview

This policy is intended to provide guidance and direction on how to proceed when confronted with a potentially impaired House Officer. It is recognized that the term “impaired or impairment” is a broad definition and encompasses a variety of impairments, conditions and potential issues. As such, these policy guidelines may not be all inclusive or representative of every situation or circumstance.

House Officers training in an Akron General Graduate Medical Education residency program are considered hospital employees, and as such, are subject to all Akron General policies and procedures.

Akron General recognizes the adverse effect employees’ use of drugs or alcohol can have on patients, visitors, other employees or the community at large. Therefore, Akron General is committed to maintaining a drug free work environment.

As such, House Officers must abide by the Akron General Human Resource policy 3.14 entitled “Substance Abuse.” This policy is available on the hospital Intranet (<http://my.agmc.org>) under the Human Resources tab.

Highlights of this policy include:

- Akron General will not hire any person who tests positive for drugs.

- House Officers are expected and required to report to training/work on time and in a fit mental and physical condition for work.
- House Officers are expected to be free from any health impairment which is of potential risk to patients or other employees or which may interfere with execution of a House Officer's duties, no House Officer whose behavior is impaired due to drugs or alcohol, including but not limited to prescribed medications or over-the-counter medications, may work.
- Except as specified within the Akron General Human Resource policy 3.14 entitled "Substance Abuse," the unlawful manufacture, distribution, dispensation, possession or use of alcohol or controlled or illegal substances or drug paraphernalia on Akron General property or while conducting hospital business is absolutely prohibited and will subject the House Officer to immediate termination and potential adverse legal consequences. Alcohol may be served at certain functions with administrative approval.
- Akron General Medical Center offers House Officers an Employee Assistance Program (EAP) which provides confidential assistance for problems including but not limited to substance abuse, behavioral health, stress, anxiety, depression and grief counseling, relationship issues and workplace problems. Moore Counseling & Mediation Service, Inc. phone number is 1-866-340-6267.
- Akron General prohibits off-the-job use of drugs and alcohol which may adversely affect a House Officer's performance, or which may jeopardize the safety of persons or property on Akron General premises.
- Any House Officer who divulges a substance abuse problem will be subject to all terms and conditions of HR policy 3.14 Substance Abuse.
- A reasonable suspicion or an infraction of HR policy 3.14 Substance Abuse is grounds for employment termination unless the House Officer agrees to: (1) Undergo a fitness for duty evaluation which may include a physical examination and/or drug and alcohol testing; (2) Sign all appropriate consent and release of information forms; (3) Abide by the recommendations of the health professional conducting the fitness for duty evaluation including referral to the EAP provider or other appropriate assessor; (4) Successfully complete any recommended treatment program; and (5) Execute a Last Chance Agreement which terms and conditions shall be set by Akron General. Any violation of the above is grounds for immediate termination.
- Mandatory treatment in lieu of termination for a drug or alcohol problem will be offered only once to any House Officer who has completed his/her introductory period. House Officers who violate this policy during their introductory period are subject to immediate termination.

Other Considerations

The State Medical Board of Ohio defines a chemically impaired physician as one who “suffers from impairment of ability to practice according to acceptable and prevailing standards of care because of a habitual or excessive use or abuse of drugs, alcohol, or other substances that impair ability to practice.”

Procedure

In addition to complying with the procedures described in HR policy 3.14 Substance Abuse, House Officers potentially meeting the definition of “impairment” will be subject to the following:

1. Reports or complaints from professionals regarding possible House Officer impairment will be forwarded to the Program Director (the House Officer’s immediate supervisor) for immediate action.
2. The Program Director (or immediate supervisor) will immediately remove House Officer from patient care responsibilities if patient safety is judged to be at risk. Consultation with an appropriate specialist or referral to EAP will be made.
3. The House Officer may access vacation time or a leave of absence to obtain appropriate evaluation and treatment.

Return to Work

The decision to allow the House Officer to resume clinical duties will be made by discussions involving the Program Director, Chairman of Medical Education & Research and any professionals judged to be necessary to determine successful treatment.

Reporting

A confidential written report prepared by the Program Director and co-signed by the Chairman of Medical Education and Research Department will be placed in the House Officer’s personal file.

Students

Medical students thought to be impaired will be immediately removed from patient care, research, learning or any other professional activity. Removal may occur by their clerkship director, elective sponsor, department chair or other Akron General Medical Center official. Return to previous activities will occur only after consultation and approval with the Chairman of Medical Education and Research, the sponsoring Akron General department and representative from the student’s Office of Academic Affairs or similar medical school department.

Employee Assistance Plan

Each year, a few of our House Officers have had personal problems regarding marriages, finances and the ability to cope with stress. Occasionally, a problem with chemical dependency occurs.

Many House Officers do not seek help for their problems due to the anxiety that this will become part of their record and follow them throughout their career. There is also concern that this would inhibit their ability to progress through the program at Akron General. It is the sincere commitment of the Medical Center to provide constructive, rather than punitive, direction to House Officers having personal problems.

Several counseling avenues are available to our House Officers. These allow you to privately choose and direct assistance in line with your personal preferences. Akron General provides the Employee Assistance Program, which is administered by an independent professional organization called Moore Counseling & Mediation Service, Inc. 1-866-340-6267. All communications are kept strictly confidential. Counseling benefits may also be offered through your medical plan.

You may also directly approach the Department Chairman or Program Director in the Department of Psychiatry & Behavioral Sciences for assistance and/or direction. Finally, counseling services are available through our Psychology Service as well as counselors in private practice.

Safety Additions

Mobile Device Policy

Mobile Device Policy (AGHS 18) is located in the Safety Policy Manual on the Intranet.

Personal cell phones are prohibited while providing care and /or services to a patient, visitors, patient's families or other employees. Cell phones cannot be used in designated areas that have been deemed a safety issue. See below areas:

During the allowed times, social courtesies must be extended to those around you including, but not limited to, volume of conversation, tone of voice and content of communication. When in patient care areas or work areas, the alert function of such devices must be silenced.

Due to the susceptibility of sensitive clinical devices to radio frequency (RF) interference, Cleveland Clinic Akron General prohibits the use of cellular phones and other RF transmitting devices within the following areas that have been deemed "Unsafe" based upon scientific evidence that supports these areas:

- 3rd Floor- CVSU, PCU, CCU, PICU
- 4th Floor – MICU / SICU
- Special Care Nursery
- Labor and Delivery OR Rooms
- Labor and Delivery Recovery Rooms
- OR Suites / Surgery – (with the exception for LifeBanc as long as they stay inside the suite)
- Pre-operative and Recovery Areas

All cell phones and other RF emitting devices are to be turned off completely (i.e., not in "standby" position) when entering the "Unsafe" areas.

Prohibition of Food and Drink in Clinical Areas

Exposure Control Plan for Blood borne Pathogen 29 CFR 1910.1030, AGMC Safety Policy 7, is located in the Safety Policy Manual on the AGMC Intranet. Due to the Bloodborne Pathogen policy driven by OSHA and accepted by The Joint Commission and CMS, there is to be NO food or drink permitted in clinical areas.

The policy states, under *Administrative Work Practices*: Eating, drinking, using tobacco products, placing items in your mouth, applying cosmetics or lip balm, and handling contact lenses are prohibited in work areas where there is reasonable likelihood of occupational exposure to blood or body fluids or in work areas where blood or body fluids are present. This includes Nurse's Stations, Medication Carts and designated refrigerators/freezers, shelves, cabinets or on countertops or bench tops where blood or OPIM are present.

Egress

Per Life Safety regulations regulated by local / state authorities, federal authorities, The Joint Commission and CMS, we are to maintain a free and clear path of egress at all times, especially in clinical areas. Any items in the hallway have to be kept to one side. If any type of fire or disaster occurs, quick evacuation may be required. Obstacles in the hallways will prevent this from happening and will jeopardize lives.

Reporting Any Environmental or Unsafe Issue

There are different avenues to utilize if you see an unsafe or environmental issue:

1. Occurrence / Near Miss report (located on the intranet under the forms tab- Safety forms- Occurrence/ Near Miss report). Once completed, it will be sent to the Safety Department. A follow up will occur.
2. Inform the Director or Manager in the department / unit issue occurs on.
3. Inform an Environment of Care Committee Member (list found on the intranet under Policy- Safety Manual Akron General Medical Center - Environment of Care Committee Members 2013).
4. Contact Safety Department directly at extension 46128 or pager 1208.
5. Call the Quality/Safety Hot Line at extension 81628 (inside only) or 47901. #1 is for Patient Safety/Quality issues and #2 is for employee or environmental issues.

Any questions can be directed to the Safety department at 46128.

Appendix A - Cashless Travel Voucher for Resident Physicians

ISSUED	May 1, 2013	APPROVAL AUTHORITY	Chairman and Executive Director, Medical Education and Research, AGMC
REVIEWED		NUMBER	GME-101
REVISED	June 2016		

OBJECTIVES

The objective of this policy is to provide a method for fatigued resident physicians employed by Cleveland Clinic Akron General (CCAG) to be transported home, and back to their vehicle, via taxi cab and for the cab fee to be charged to the CCAG Medical Education Department.

SCOPE

This policy is intended to provide guidance to CCAG resident physicians. This policy is not intended to be an all-inclusive resource in all situations. Each individual should exercise good judgment and fiscal responsibility remembering that this program is intended to provide a safe means of travel when no reasonable alternative exists.

DEFINITIONS

Cashless Travel. The term used by the City Yellow Cab Company when referring to transportation they provide that is billed directly to a third party and not the passenger.

POLICY

CCAG will provide transportation home and back to their vehicles for resident physicians who either (a) deem themselves unable to safely drive home due to work-related fatigue, or (b) are deemed by a supervisor to be unable to safely drive themselves home due to work-related fatigue.

The Cashless Travel Vouchers are intended for use only by resident physicians and are not authorized for use by others unless express verbal or written consent is provided by the Chair or Executive Director of Medical Education and Research. Use of the cashless travel vouchers for anything other than described in this policy shall be grounds for disciplinary action and require reimbursement of all charges.

CCAG is not responsible for the return or retrieval of an employee's personal vehicle.

PROCEDURE

If a resident physician, or a supervisor, determines that a resident physician is too fatigued to continue working or safely drive home, the following procedure shall be followed:

1. If the departure from service is unscheduled, the fatigued physician, or an advocate, shall immediately notify his or her supervisor.
2. The fatigued physician, or an advocate, shall notify Security at the main entrance that a City Yellow Cab is needed. The following shall be communicated to Security:
 - a. If they do not know, the phone number for City Yellow Cab is 330-253-3141.
 - The number is also on the M.E.R. Cashless Travel Voucher (Annex A).
 - b. The Cashless Travel Vouchers will be used on the AGMC M.E.R. account (Medical Education and Research).
 - This must be communicated to the cab company when they are called.
 - c. The exact door at which the pickup should be made.
 - d. The name of the physician who will be the passenger in the cab.
 - e. That two M.E.R. Cashless Travel Vouchers (Annex A) will be needed (if they are not already available).
 - These are available in the security office (main entrance).
 - One is for the trip home and the other for the return to the hospital (where it is presumed a personal vehicle is located).
3. Security, or their designee, will call the cab company (330-253-3141) and inform them of the following:
 - a. A Cashless Travel Voucher will be used on the AGMC M.E.R. account (Medical Education and Research).
 - b. The exact door at which the pickup should be made.
 - c. The name of the physician who will be the passenger in the cab.
4. Security then shall:
 - a. Check the fatigued physician's ID to confirm the physician's name,
 - b. Legibly write the fatigued physician's name on both vouchers,
 - c. Legibly write the security officer's name on both vouchers, and
 - d. Ask the fatigued physician to sign both vouchers.

5. Security will give both vouchers to the passenger and instruct them that one is for getting home and the other for returning. Each is to be given to the cab driver at the start of each trip.
6. After providing the needed transportation, the City Yellow Cab Company shall include a copy of the Cashless Travel Voucher with the invoice sent directly to the AGMC Medical Education Department. The details of the trip (i.e., destination address, miles, time, etc.) must be added to each voucher by the cab company.
7. The Medical Education Department shall return a copy of the voucher (received from the cab company) to the appropriate program Chairman.

Annex A – Cashless Travel Voucher for Resident Physicians

INSTRUCTIONS FOR USE		
1. Call 330-253-3141 to arrange for transportation. 2. Tell Dispatch the account is AGMC M.E.R. (cashless transport) – tell them “M.E.R. is calling for transport.” 3. Tell Dispatch the exact door at AGMC for pick up and the passenger’s name. 4. Security prints both the passenger’s and security officer’s name on two vouchers and asks passenger to sign both. 5. Security gives both vouchers to passenger; one is to be given to cab driver at the start of each trip. 6. Ask passenger to wait near door and watch for cab. <i>This voucher may only be used by authorized AGMC personnel. Unauthorized use may be cause for disciplinary action and require reimbursement of all charges.</i>		
To Be Completed By Cab Driver		
CAB NO	City Yellow Cab	DATE
	650 Home Ave	M
	Akron, Ohio	D
	330-253-3141	Y
<input type="checkbox"/> AGMC, 400 Wabash Ave., Akron		
FROM		
TO		
ENGAGED		DISMISSED
AM		AM
PM		PM
P/U MILES	D/O MILES	
DRIVER ID		
	Charge Amount	
Medical Education & Research (M.E.R.)		
PASSENGER SIGNATURE		
PASSENGER PRINTED NAME (Written by Security)		
SECURITY OFFICER’S PRINTED NAME		

Revised: 26 April 2013 (DCC)

Appendix B - Resident Educational Expense Reimbursement

ISSUED	July 1, 2010	APPROVAL AUTHORITY	Chairman and Executive Director, Medical Education and Research, AGMC
REVIEWED		NUMBER	GME-001
REVISED	July 2016		

Objectives

To establish rules and regulations, along with a protocol for resident educational expenditures and reimbursement.

To provide an appropriate level of accounting and business controls in compliance with Internal Revenue Service regulations and federal and state laws governing not-for-profit organizations.

Scope

This policy is intended to provide guidance to Cleveland Clinic Akron General (“Akron General”) resident physicians authorized to make educational expenditures as provided by the Akron General Residency programs. This policy is not intended to be an all-inclusive resource in all situations. Nor does this policy specifically address all non-qualified expenditures. Each individual should exercise good judgment and fiscal responsibility remembering that expenses must have a legitimate, approved educational purpose and serve the best interests of Akron General.

For those situations not specifically addressed in this policy, please refer to Human Resources Policies 8.08, Educational Programs, and 8.09, Business Travel , both of which also apply, and/or seek consultation with the Chairman or Executive Director of Medical Education and Research regarding corporate payroll/accounting policies. For guidance on business courtesies involving individuals or entities that are potential or actual referral sources, please refer to the Compliance Policy on Non-Monetary Compensation and Medical Staff Incidental Benefits (COMP-030).

Definitions

“Approving Authority,” for the purpose of this policy, means the individual in the next highest position who has the authority to approve educational expenditures and requests for reimbursement. For reimbursement and reconciliation purposes, residents must have either the Chairman or Executive Director of Medical Education and Research approve all educationally-related expenses. This authorization meets the requirements of HR Policy Number 8.08. No Akron General resident is authorized to approve his/her own educational expenses or those expenses of a peer. The Chairman and/or the Executive Director of Medical Education and Research have the authority to issue the final determination regarding whether an expense(s) is deemed educational in nature, and ultimately reimbursable.

“Educational Expenses” are generally described as expenses incurred in the course of participating in an Akron General Residency program. These expenses shall directly relate to the resident’s current training program and educational experience and include those approved educational tools, materials, fees and conferences.

Policy

Akron General will reimburse its residents for educational expenditures that are properly authorized, reasonable, and appropriately substantiated by supporting documentation. Reimbursement shall be within the confines of each resident’s defined contractual educational allowance.

Residents shall exercise appropriate care in incurring educational expenses. Because Akron General is a not-for-profit, charitable, or 501(c)(3) organization as defined by the Internal Revenue Service (IRS), such expenditures should be moderate both in frequency and in amount as approved by the Department of Medical Education.

Meal expenses may not exceed \$75 per day (HR Policy 8.09).

Reimbursement Procedure

Educational expenses shall not exceed the resident’s contractual educational allowance limit for the academic year. Residents do not have a cash option or any right or entitlement to the cash balance of any unused portion of the educational allowance.

Reimbursable Educational Expenses include:

- Medical Books and Journals
- Dues and/or subscriptions to professional medical organizations
- Approved educational conference expenses – conference registration; airfare or mileage reimbursement; lodging; rental car or cabs; meals and snacks; and incidentals such as tips and gratuity
- Personal digital assistant (PDA) device (maximum reimbursement shall not exceed 25% of the resident’s total annual educational allowance)
- Software for computer or PDA such as Microsoft Office or Epocrates
- Step 3 or Complex Fees

- Training Certificate Fees
- BLS and/or ACLS Training Fees (only if not paid for by Program)

Expenditures that are NEVER reimbursable include, but are not limited to:

- Medical License – regardless of state applied in
- Computers or peripheral devices (desktop computer, laptop or printer)
- Cameras and related equipment
- Rent or lodging for approved “away” rotations
- Office supplies (paper, pens, files folders, etc.)
- Alcoholic beverages or personal bar bills
- Expenditures for family members, friends, significant others, or other residents
- Personal grocery expenses (unrelated to conference meals and/or snacks)
- Personal dining, meals or snacks (when not at an approved conference or event)
- Entertainment (in-room or theatre movies, local attractions, etc.)
- Sporting and entertainment event tickets
- Cellular phones (refer to AGHS policy on cell phone use for business purposes)
- Gift cards
- Car repair or maintenance
- Personal care services (hair and nail care, laundry, shoe shine)
- Country club, health club, or social organization dues
- Daycare for children or pets
- Gentlemen’s club expenses
- Gambling expenses
- Personal credit card interest charges
- Personal losses
- Political or personal charitable contributions
- Subscriptions or publications without business-related content
- Tobacco products
- Traffic citations
- Personal items including clothing, toiletries, valet service, entertainment (HR Policy 8.09)

Receipts. An original, itemized receipt must accompany expenses submitted for reimbursement along with a notation as to the educational purpose next to the original receipt. A customer credit card statement or a non-itemized restaurant receipt is not considered an acceptable form of receipt alone. A customer credit card billing statement will be accepted only in the unusual case where it is not possible to obtain a register receipt.

Original receipts should reflect only those expenses directly related to the individual resident requesting reimbursement (i.e., one resident’s receipt should not reflect the expenses or charges of another resident). Akron General will not “split” or “divide” receipts for individual resident’s reimbursement reconciliation (i.e., if two residents share a hotel room at a conference, they

should request the hotel for a receipt that appropriately allocates half of the expenses on each receipt for individual reimbursement).

Approval of Reimbursement. Reimbursement for educational expenses always requires approval by one's Approving Authority (see definition). The leaders who approve the reimbursement and signs the business expense report, Travel and Education form, or corporate credit card reconciliation statement is responsible for reviewing the documentation for:

- Business purpose notation
- Correct calculation totals
- Supporting documentation and receipts
- Policy and budget compliance

Submitting Expenses for Reimbursement. Resident expense documentation will be forwarded to the Chairman or Executive Director of Medical Education and Research who will confirm the accuracy of expense documentation and compliance with this policy. Once verified the Chairman or Executive Director will forward the documentation to Accounts Payable for record retention of all reimbursements.

Falsification of Expenses. Submitting fraudulent receipts or falsifying any expense documentation will result in loss of reimbursement privileges and/or progressive discipline up to and including termination of employment.

Record Retention. The Accounts Payable Department and/or the Finance Department will scan all business expense documentation, including detailed receipts, into the ChartMaxx system for record retention.

Internal Audit. The Cleveland Clinic Corporate Compliance Office may conduct an audit of the resident expenditures. The audit findings will be reported to the CEO, Akron General and the Board Governance Compliance Committee.

Appendix C - House Staff Vendor Interaction Policy

ISSUED	December 16, 2011	APPROVAL AUTHORITY	Chairman and Executive Director, Medical Education and Research, AGMC
REVIEWED		NUMBER	
REVISED	June 2016		

Objectives

The objective of this policy is to (a) educate and clarify considerations House Staff should take into account when interacting with industry or vendor representatives, and (b) meet ACGME Institutional Requirement III.B.13 (Effective July 1, 2007). The term “industry” or “vendor” includes, but is not limited to, pharmaceutical, nutritional, biomedical and medical device, equipment and other health-care related industry.

Scope

This policy applies to all graduate medical education programs and House Staff at Cleveland Clinic Akron General (CCAG).

Policy

It is the policy of the Department of Medical Education & Research that activities of Akron General are not influenced through industry persuasion, whether collectively or through individual interaction.

It is recognized that Akron General has an established Vendor and Conflict of Interest policies. Further, CCAG recognizes that the Accreditation Council for Graduate Medical Education (ACGME) and the American Medical Association (AMA) provide guidance on the relationship between Graduate Medical Education and Industry, which provides ethical opinions and guidelines that address this relationship. Ultimately, an educational benefit should be derived from any Industry or Vendor interaction, and such interactions should abide by applicable standards and principles of Professionalism.

CCAG will follow the afore-referenced organizational policies and ACGME and AMA principles to guide the efforts of the Graduate Medical Education programs to promote unbiased learning, through professionals who serve the best interests of patients in a consistently ethical and exemplary fashion.

Procedure

1. Individual programs will inform and educate House Staff during the duration of training about the considerations, effects, risks and benefits of interactions with industry representatives.
2. Individual programs are encouraged to develop a component of the curriculum to teach residents to properly analyze and better understand the information with which they are presented. Faculty members are encouraged to be present and participate at interactions so as to be able to model appropriate behavior.
3. House Staff will follow the guiding and ethical principles of timely and truthful reporting of potential conflicts of interest, and disclosure and management of conflicts of interest.
4. Individual Program Directors will serve as a source of education and guidance for their House Staff related to vendor interaction and the resolution of defined conflicts.
5. House Staff should report deviations of this policy to their Program Director, Chairman of Medical Education and Research or Corporate Compliance.
6. While CCAG and the Department of Medical Education & Research cannot restrict House Staff behavior and interactions outside of its facilities, it is recommended that House Staff consider this policy as a guide for interactions that may occur under these circumstances.

Appendix D - Support for Residents and GME Programs in the Event of a Disaster

ISSUED	January 1, 2013	APPROVAL AUTHORITY	Chairman and Executive Director, Medical Education and Research, AGMC
REVIEWED		NUMBER	GME-010-2013
REVISED	June 2016		

Objectives

The objective of this policy is to (a) address administrative support for Akron General graduate medical education programs and residents—including assistance for continuation of resident assignments—in the event of a disaster or interruption in patient care, and (b) meet ACGME Institutional Requirement IV.M (Effective July 1, 2015). This policy is intended to supplement, and not replace, the various institutional emergency action and business recovery plans in place that can be found on the AGMC Intranet under “Emergency Preparedness Policies.”

Scope

This policy applies to all graduate medical education programs and residents at Cleveland Clinic Akron General (CCAG).

Policy

In the event of a disaster impacting the graduate medical education programs sponsored by Akron General, the Graduate Medical Education Committee (GMEC) establishes this policy to protect the well-being, safety and educational experience of residents enrolled in Akron General graduate medical education programs.

Akron General has the following emergency plans and policies in place that provide direction during various disasters and emergency situations with which resident physicians might become involved:

- MCI/Disaster Plan (described in the MCI/Disaster Manual)
- Nuclear-Biological-Chemical Readiness Plan
- Emergency Radiation Patient Contamination Plan
- Emergency Operations Plan
- Mass Fatality Surge Plan
- Evacuation Plan
- Tornado Plan

- Bomb Threat
- Business Recovery Plan
- Power Outage Response Plan
- Employee Guidelines for Handling Suspicious Mail/Substances
- Earthquake Disaster Plan
- Physician Disaster Credentialing
- Code Silver – Hostage or Weapon Plan
- Code Violet – Behavioral Emergency Plan

Akron General Residents must be familiar with their respective roles and responsibilities during these emergency situations and follow the direction provided in these plans and policies.

Procedure

Should an emergency or disaster arise that effects the GME programs and/or residents to such an extent that the programs and/or residents cannot perform their duties and fulfill their responsibilities at Akron General (the sponsoring institution), the DIO and GMEC will act expeditiously to determine if transfers to other programs are needed in order that residents will be able to complete program requirements within the standard time required for certification. In the event that GMEC is unable to convene, the DIO is authorized to act as the representative of GMEC.

Once it has been determined that the sponsoring institution can no longer provide an adequate educational experience for its residents, action will be taken to arrange for the temporary transfer of the residents to programs at other sponsoring institutions until such time that Akron General is able to resume providing the educational experience needed. Residents who transfer to other programs as a result of a disaster will be provided by their program directors with an estimated time that relocation to another program will be necessary. Should that initial time estimate need to be extended, the resident will be notified by their program directors using written or electronic means identifying the estimated time of the extension. If the disaster prevents the sponsoring institution from re-establishing an adequate educational experience within a reasonable amount of time following the disaster, then permanent transfers will be arranged.

The DIO will be the primary institutional contact with the ACGME and the Institutional Review Committee Executive Director regarding disaster plan implementation and needs within the sponsoring institution. The DIO will contact the ACGME in the event of the implementation of this policy.

In the event of a disaster affecting other sponsoring institutions of graduate medical education programs, the program leadership will work collaboratively with the DIO who will coordinate on behalf of AGMC the ability to accept transfer residents from other institutions. This will include the process to request complement increases with the ACGME that may be required to accept additional residents for training. Programs currently under a proposed or actual adverse accreditation decision by the ACGME will not be eligible to participate in accepting transfer residents.

Programs will be responsible for establishing procedures to protect the academic and personnel files of all residents from loss or destruction by disaster. This should include appropriate storage of data.

Appendix E - Certification Policy

ISSUED	December 16, 2011	APPROVAL AUTHORITY	Chairman and Executive Director, Medical Education and Research, AGMC
REVIEWED		NUMBER	
REVISED	June 2016		

Purpose

The purpose of this policy is to (a) define and standardize the certification requirements for all residents in Akron General Residency Programs, and (b) to require residents to maintain certifications for the duration of their residency to ensure the safety of patients.

Policy

It is the policy of the Department of Medical Education & Research that each resident will maintain required certifications while in a residency training program at Akron General.

Procedure

All residents are required to be ACLS and BLS certified when they begin their residency program at Akron General and must gain and retain other required certification specific to their training program. These certifications will be updated and tracked in New Innovations by the Department of Medical Education & Research with the assistance of the respective program's coordinator.

Required certifications based on training program:

- Emergency Medicine ATLS, PALS
- Family Medicine PALS, ALSO, ACLS, BLS, NRP
- General Surgery ATLS
- Internal Medicine ACLS, BLS
- Obstetrics & Gynecology BLS, NRP
- Orthopaedic Surgery ATLS
- Psychiatry BLS
- Urology BLS

New Innovations will notify both the resident and the GME Coordinator when the certifications are expiring. It is the responsibility of the resident to register for a class to renew their certifications. Upon completion of the re-certification course, the resident must provide a copy of the life support card(s) to the GME Coordinator in Medical Education.

The Department of Medical Education & Research and the respective residency program(s) will cover the cost of required certifications as long as the recertification does not take place in the

last 6 months of residency at Akron General. If recertification does need to occur in the last 6 months, it will be the responsibility of the resident to absorb the cost.

Appendix F - Hobart Loan

ISSUED	December 2011	APPROVAL AUTHORITY	Chairman and Executive Director, Medical Education and Research, AGMC
REVIEWED		NUMBER	
REVISED	June 2016		

Objective

The objective of this policy is to provide guidelines for the application and approval process of Hobart Loans for all incoming and current Graduate Medical Education Resident Physicians.

Scope

This policy is intended to provide guidance to all Akron General residents related to their eligibility to obtain a Hobart Loan provided by the Akron General Foundation.

Definition

The Department of Medical Education & Research at Akron General offers Hobart Loans, in increments of \$1,000 or \$2,000, to all incoming and current resident physicians. First time loan candidates can obtain a Hobart Loan with no interest, while continuing candidates incur a 5% interest rate. Hobart Loans are secured loans intended for relocation but designed to assist resident physicians in financial need and can be applied for multiple times as long as eligibility criteria are met. Hobart Loans are secured through payroll deduction of 26 pay periods until the loan amount plus any interest is paid back in full.

Policy

Hobart Loan applicants shall be considered without regard to age, race, color, religion, sex, disability, veteran status, sexual orientation, national origin or any other applicable legally protected status.

The Department of Medical Education & Research at Akron General shall define those general eligibility requirements that guide the process of eligibility for Hobart Loans.

If employment is terminated for any reason the resident physician will owe the remaining amount in full to the hospital. The remaining amount will be taken from the resident physician's last paycheck. If the paycheck does not equal the remaining balance, the resident physician will owe this balance to the Hospital. This balance should be paid back to the Hospital by check by the last day of employment.

Procedure

All applicants:

- Preference for 1 year of service to the health system, however exceptions can be made for incoming residents
- Signing of cognitive statement (Exhibit A)
- Payroll deduction

Additional Requirements for Incoming Residents:

- State Medical Board of Ohio Training Application
- Human Resources paperwork
- Employee Health Physical (including both PPD tests and required immunizations)
- Social Security Number
- National Provider Identifier (NPI) Number
- Scrub size
- White coat size
- AGMC Badge (HR meeting)
- AGMC Employee # (HR meeting)
- Photo
- Signed Contract
- Academic Transcripts
- MSPE (Dean's letter)
- 3 Letters of Recommendation
- USMLE Steps 1 & 2 (both CK and CS) copy of Transcript
- ERAS application

Additional requirements for Incoming Resident Visa Holders:

- ECFMG Certificate
- Receipt of US visa
- Entry into the US
- SEVIS reporting documentation (J-1 visa holders only)
- Copy of most recent 1-94 form
- Completion of online orientation materials
- State Medical Board Acknowledgement Letter for Training Certificate (H-1B visa holders only)
- Step 3 (H-1B visa holders only) Transcripts

Additional requirements for continuing candidates:

- Any previous Hobart Loan debt has been paid back in full to Akron General Medical Center
- Incur 5% interest rate on the secure loan amount



Exhibit A

Hobart Loan Application

Name: _____ PGY-level: _____

Outstanding Hobart Loan: YES NO Amount left to be repaid: _____

Continuing Candidate: YES NO Interest Rate: _____

Place initials in front of the one request you wish to make:

_____ I request a \$1,000.00 secure loan through the Hobart Loan Fund of Akron General Medical Center for the purpose of _____, payable over 26 pay periods at a rate of \$_____ per pay.

---OR---

_____ I request a \$2,000.00 secure loan through the Hobart Loan Fund of Akron General Medical Center for the purpose of _____, payable over 26 pay periods at a rate of \$_____ per pay.

I understand a COGNITIVE NOTE must be signed and that my acceptance of the check in the amount of \$1,000.00 or \$2,000.00 (circle one) acknowledges and represents my agreement to the above. I also understand that should my employment terminate prior to loan repayment, the balance due will be withheld from my final paycheck.

Print Name

Date

Signature

Employee ID Number or SSN

Employee Postal Address

Medical Education Recommendation for Loan:

I hereby (recommend / do not recommend) the above request for a Hobart Loan.

Date: _____ Signed: _____

APPROVED by AGMC Corporate Controller:

Date: _____ Signed: _____