

Temple University, Department of Surgery

Policy on Resident Evaluation, Promotion, and Termination

This policy and procedure delineates the department of surgery guidelines for the evaluation, promotion, and termination of surgical residents.

Each resident is evaluated by the teaching faculty and senior resident on the respective service at the end of each rotation. The resident is evaluated with respect to the six ACGME core competencies: Patient care (clinical and technical skills, as well as judgment), medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice. A standardized computerized form is completed and placed in the resident's file. (See Attachment A)

A 360 degree evaluation is sent to selected members of the health care team who evaluate the housestaff as well on selected services. (See Attachment B)

All categorical and preliminary residents must complete their duty hours and must enter all cases into their op log by the end of each month. All PGY1 categorical and preliminary interns must complete their procedure card as early as possible in their intern year and a copy of this procedure card must be turned in monthly until completed.

All categorical and preliminary residents are expected to sign Clinic Sign-In Sheets at all rotations at least once a week.

Beginning with the 2010-2011 academic year: All residents who will be PGY3 categorical surgical residents must have completed all five on-line FLS didactic modules as well as the first three skills modules.

All categorical and preliminary residents are reviewed semiannually at a meeting of the teaching faculty of Temple University Hospital and the Directors of Surgery at the integrated and affiliated institutions. During these meetings, each resident is discussed in depth. For each resident, their evaluations are discussed as well as their performance on the IT/SBSE exam, Skills Lab, Attendance at mandatory Wednesday morning conferences, Completion of Academic Administrative Duties and overall performance for their level of training. A formal program of remediation may be required to help address deficiencies in ACGME competencies. Summaries of comments made about each resident are compiled.

The program director and/or associate program director meet with each resident twice a year. In that meeting their evaluations are discussed, a composite of their computerized evaluations is reviewed and signed by the surgical resident. Their overall performance evaluation (progress report) from the semiannual meetings is reviewed with the surgical resident, signed, and placed in their file. (See Attachment C)

As stated in the TUH GMEC Medical Licensing Examination Requirements policy:

Residents who are entering their first year of post-graduate training must schedule and take the USMLE Step III within nine (9) months of beginning the program. Residents are required to provide the Program Director with the results of the USMLE III within one week of the results being available.

Residents whose training at Temple University Hospital begins at the second year of post-graduate training must schedule and take the USMLE Step III within three (3) months of beginning the program. Residents are required to provide the Program Director with the results of the USMLE III within one week of the results being obtained.

Those residents who score below the 35th percentile in the IT/SBSE exam are placed on a carefully supervised mandatory reading program utilizing one of the standard surgical textbooks. Chief residents who score below the prescribed percentile may not be allowed to sit for the American Board of Surgery Qualifying Examination until sufficient improvement in knowledge base is demonstrated.

Based upon all of the above evaluations and semi-annual meetings, residents may be promoted to the next level, asked to repeat a rotation or an entire year, asked to participate in a special remedial program, placed on academic probation, provided with psychological counseling, or dismissed. Residents are not dismissed without due process as per their resident contract. A score below the 10th percentile in two consecutive years on the IT/SBSE, in the context of other deficiencies may provide strong grounds for dismissal. See resident appointment agreement for procedure on due process.

Chief Residents will give one Grand Rounds during their fifth year. All Surgical Categorical Residents will be required to submit and have accepted two manuscripts prior to the completion of the residency program. Faculty and secretarial support will be provided. The Chairperson will not sign off on their successful completion of the surgical residency program without this requirement fulfilled.

A written evaluation for each resident who completes the program is performed. This evaluation will include a review of the resident's performance during the final period of training. It verifies that the resident has demonstrated sufficient professional ability to practice competently and independently.

.....date.....date.....

Daniel T. Dempsey, M.D.
Chairperson

Amy J. Goldberg, M.D.
Program Director

.....date.....
Resident Signature

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Resident Print Name

Updated 5/09

