

CONTINUITY MEDICAL CLINIC AND OTHER AMBULATORY SITES RESPONSIBILITIES AND SUPERVISION

This policy is designed to:

- a. Delineate the responsibilities of residents in their continuity medical clinic.
- b. Enumerate the number of patients that residents must see during each session.
- c. Describe the attending responsibilities for medical clinic.
- d. Apply to all continuity clinic sites, including University Health Center, the VA Primary Care Clinics, Mercy Family Care and Waxter Center, and for all other ambulatory sites.

1. Residents will:

- a. Check www.amion.com on a regular basis to determine their assigned clinic afternoon for that rotation.
- b. Arrive on time at their weekly clinic site, having reviewed their schedule of patients and previous notes and laboratory results prior to arrival.
- c. Evaluate their patients in a timely manner.
- d. Present all new patients and any preoperative evaluations to the attending. Interns and Residents at the Faculty Practice Office will present all patients – new and return visits – to the attending.
- e. Review and sign-off on all laboratory studies for their patients.
- f. Write a clinic note appropriate for the level of care delivered before leaving clinic.
- g. Notify the primary care chief resident in the event of illness or other emergent absence as soon as possible.

2. Schedules

- a. The Primary Care Chief Resident, under the supervision of the Program Director, will assign new residents to a continuity medical clinic site for the duration of their training.
- b. This chief resident will ensure that each resident's clinic schedule meets RRC requirements, including:
 - i. Residents will attend a minimum of 130 clinic sessions during their training. This is a minimum and it is expected that residents will attend their clinic whenever possible.
 - ii. Residents will not attend their clinic when on NACR, Night Float, ER, Mercy MAO, or Blue-Pink cross cover rotations. Residents will attend their clinic during all other rotations, including Day Float, Pink, Blue, MICU, CCS, and PCS.
 - iii. Residents will not miss their weekly clinic for more than 4 weeks, excluding vacation time.
 - iv. The chief resident will cancel clinic for 2-week vacations. The resident is responsible for completing the vacation form at least 12 weeks advance and securing approval by the primary care chief resident. If vacation requests are approved within the 12 week period the resident is responsible for their clinic and their clinic will not be canceled.
 - v. Residents will not attend their clinic when they are post-call after being on duty for 30 hours. Clinics will be canceled by the Chief Resident when residents are post-call on CCS, PCS, Blue, Pink, Cancer Center and residents on overnight Med ID calls.

3. Supervision

- a. The attending will be present on-site at all times and see patients with the residents as needed. It is strongly encouraged that the attending see all the first year residents' patients with the resident.
- b. The attending will co-sign all notes in a timely fashion and inform the residents of any changes, additions or suggestions.
- c. There will be no more than 4 residents to each supervising physician.

4. Making continuity a priority
 - a. Residents will work with the site directors, registration staff, nurses and other personnel to maximize the continuity of care, including ensuring patients receive appropriately timed return visits and informing their fellow residents when patients are admitted to the hospital.
 - b. Residents will develop a positive therapeutic relationship with their patients. Among other things, residents are strongly encouraged to inform patients in a timely fashion of test results and to give patients their business card.
 - c. Residents are expected to provide the highest quality of care to patients at all times. This includes appropriately responding to patient's needs between clinic visits. Residents must be responsive to pages and needs communicated by their clinic, and ensure patients under their care are able to contact them easily between visits. Residents will also follow up as appropriate to any patient lab work or testing between clinic visits.
 - d. Residents will work with their "buddy resident" to ensure follow-up for patients during weeks when the primary resident is not in clinic.

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