Introduction

DEPARTMENT OF RADIOLOGY PROGRAM MANUAL

All physicians-in-training at the University are classified as either residents or fellows. The information contained in this Program Manual pertains to all residents in the Department’s programs except as otherwise identified in the Program Manual or addendum. This Manual outlines benefits, policies, guidelines and other regulations that apply to all resident training in the Department of Radiology.

The Institutional Policy Manual contains policies, procedures and information that apply to all residents throughout the University of Minnesota Medical School. The Program Manual is specific to each program. All materials are intended to be written in accordance with the Accreditation Council for Graduate Medical Education (ACGME). Please note that the Institutional Policy Manual and the Department Program Manual are designed to work together. Information contained in Institutional Policy Manual may not be replicated in Program Manual.

All information outlined in this Program Manual is subject to periodic review and change. All residents are subject to, and required to be familiar with and to comply with all policies and procedures of the University including the Institutional Policy and Department Program Manuals.

Throughout this Manual, individual institutions will be identified as follows:

- University of Minnesota Health: UMMC
- University of Minnesota Masonic Children’s Hospital: UMCH
- Hennepin County Medical Center: HCMC
- Minneapolis Veterans Affairs Health Care system: MVAHCS
**Department Mission Statement**

The mission of the Department of Radiology is to be a leader in enhancing the health of people through education, biomedical research, and clinical programs.

**Program Mission Statement**

The Department of Radiology at the University of Minnesota School of Medicine, in conjunction with its affiliated institutions (including but not limited to the Minneapolis Veterans Affairs Health Care System and Hennepin County Medical Center) provides graduate medical education in Diagnostic Radiology and its subspecialties programs:

- Breast Imaging Fellowship
- Diagnostic Radiology Residency
- Neuroradiology Fellowship
- Nuclear Medicine Fellowship
- Pediatric Neuroradiology
- Thoraco-Abdominal Radiology Fellowship
- Vascular and Interventional Radiology Fellowship

Our educational mission is to provide an atmosphere of learning and academic curiosity, and to provide strong basic training in diagnostic radiology and its subspecialties including but not limited to breast, cardiac, abdominal, musculoskeletal, neuro-, pediatric, noninvasive vascular, and thoracic imaging, as well as nuclear radiology and ultrasound.

Administrative oversight of these programs is provided by the ALRT Administrative Center - Departments of: Anesthesiology, Laboratory Medicine and Pathology, Diagnostic Radiology, Therapeutic Radiology

The mission of the A.L.R.T. Administrative Center, as part of the University of Minnesota School of Medicine, is to provide uniform service delivery to our departments and institutes. These services consist of human resources, payroll, communication, education, grants management, financial reporting and budget. Our goal is to provide exceptional service while balancing the expectations of the multiple constituents. To achieve this goal we will foster a community based on communication, cooperation and expertise by drawing on our individual backgrounds, strengths and unique histories.

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Section I Student Services

UNIVERSITY PAGERS
Residents are assigned MHealth pagers at the beginning of their RL1 Year for the duration of their residency. Contact the Shari Johnston, Program Administrator, 612-626-5589 or sharij@umn.edu to report any missing or malfunctioning cards. Resident is responsible for replacement cost in the amount of $60 under most circumstances.

E-MAIL AND INTERNET ACCESS
As students at the University, all residents are provided with a University E-mail/Internet access account. With this account trainees can access the Internet and E-mail from any of their assigned training sites.

If you are using an independent ISP, you must forward your University E-mail account to your preferred E-mail account as required by the Medical School. Log on to http://www.umn.edu/validate to do so. (To learn the E-mail address assigned to you, go to the University’s web page, www.umn.edu, click on “People Search” then type your name into the “Search” box.)

Information regarding the University of Minnesota School of Medicine, Graduate Medical Education and/or the Department of Radiology can be located at the following web sites:
Medical School Web Site: http://www.med.umn.edu
Graduate Medical Education Administration Web Site: http://www.med.umn.edu/gme
Department of Radiology Web Site: http://www.radiology.umn.edu

Trainees are required to maintain an E-mail account and to check their E-mail daily for Program, Medical School and University notices.

CAMPUS MAIL

DEPARTMENT MAILROOM: ROOM B-221, MAYO MEMORIAL BUILDING

OUTGOING MAIL Can be left in the “Outgoing Hospital/Campus Mail” basket.

INCOMING MAIL Residents may receive professional related mail in their mailbox.

DEPARTMENT MAILING ADDRESS
420 Delaware Street. S.E., MMC 292
Minneapolis, MN. 55455

Residents are not to send or receive personal mail through the University system. Outgoing U.S. mail may also be placed in the United States Postal Service mailbox located just outside the main entrance of the University of Minnesota Medical Center (on Harvard Street).

The mailbox at UMMC is the trainee’s MAIN mailbox, but HCMC and MVAHCS also have mailboxes for residents. The department is not responsible for moving mail between hospitals depending on your rotation.

Residents are required to check their mailboxes on a weekly basis for Program, Medical School and University notices. Residents are also required to empty their mailboxes on a regular basis.

MHEALTH STAFF ID
Residents will be expected to wear your MHealth ID badge at all times during your rotations.
TUITION AND FEES
Tuition and fees are being waived at this time.

SECURITY/ PRIVACY COORDINATOR
Sally Sawyer, Graduate Medical Education Manager, serves as the ALRT Center Privacy Coordinator. Questions and/or concerns can be directed to Sally at 612-625-3518 or sallyann@umn.edu

DEPARTMENT USB DRIVE
Residents are given an encrypted USB drive for use during residency training and will be required to sign a contract agreeing to abide by HIPAA and Departmental policies. By accepting a Departmental USB drive you are agreeing to the terms of the contract. This device is being temporarily loaned to you by the Department of Radiology. You are required to return the USB drive to Program Administrator upon completion of (or departure from) the Program. This contract is subject to change without notice.

- Resident is responsible for replacement cost in the amount of $30 should you damage or misplace this device.
- This Department strictly prohibits the downloading of any patient demographic data (or any information that could identify a patient). To download such information would be in violation of Federal Health Information Portability and Accountability Act (HIPAA) regulations.

SECTION II BENEFITS

STIPENDS
Medical Residents who meet Departmental, Medical School and University requirements are appointed to one-year training positions from July 1 through June 30 of the following year (unless otherwise agreed to in writing).

Base stipend rates are posted at http://www.gme.umn.edu/residents/stipendinfo/home.html

PAYCHECKS AND PAY PERIODS
Biweekly paychecks are issued every-other Wednesday beginning July 9th, 2014.

You are encouraged to have your checks automatically deposited to your banking institution to avoid loss or delay. Your pay statement can be viewed online at http://hrss.umn.edu. If you do not have direct deposit you will receive a check on payday. This check must be picked-up from ALRT Payroll (7th floor Mayo Building). It cannot be placed in your mailbox or mailed to your home. Please keep your pay statements for future reference, as they contain deduction amounts that you’ll need when you prepare your tax returns. The Department of Radiology keeps no record of your deductions.

Medical Residents are subject to withholding of Federal and State income taxes, as well as FICA taxes (Social Security). Medical Residents pay insurance fees by payroll deduction over 26 pay periods.

Payroll forms (i.e., automatic deposit, W4, duplicate W2, etc.), can be obtained online at http://hrss.umn.edu A new W4 form must be completed each time a name or address change occurs.

COPY OF PAY CHECK OR W2
To obtain a copy of your pay check go to: MyU > MyPay

PAYROLL CONTACT
Contact Kirk Skogen at k-skog@umn.edu regarding questions pertaining to payroll, taxes, deductions, W2s, etc.
**Resident Leave (Including Vacation, Illness and Other Types of Leave)**

Except for unexpected absence related to illness, all leave must be pre-approved. All resident leave must be documented in RMS duty hours.

The Chief Residents and the Program Administrator should be concurrently notified of leave requests by email as soon as possible. The type of leave, as noted below, should be specified. Depending on scheduling considerations and in a timely manner, the Chief Residents will approve the request, forward the “chief approved request” by e-mail to the Program Administrator including attached revised schedule noting changes for final approval by the Program Director.

**Unpaid Leave** While on unpaid leave, the resident is responsible for payment of any insurance (residents on unpaid leave will be billed monthly).

**Vacation**

Check the holiday schedule (including variation by location) and “block out dates” schedules before requesting time off. Up to twenty (20) working days per year may be taken as vacation which is paid leave. Unused vacation time may not be carried over to the next year. Depending on rotation up to five (5) vacation days may be taken during a given month. Requests to exceed this limit must be approved by the Program Director in advance. No more than ten (10) total vacation days can be taken from any section during the residency without the Program Director’s approval.

To request time off – resident must complete and submit a vacation request via the Google On-Line Request Form. Whole weeks off may be requested anytime during the academic year. Partial weeks off may be requested up to 6 weeks in advance.

**Dr. Kuehn-Hadjer needs to approve 4 or more days off of the Breast Rotation. Request greater than 3 days will have to be made up. Time off from MHealth-IR will need to be approved also by Dr. D’Souza or Dr. Rosenberg.**

**Illness**

Residents must call in sick as soon as they know they are unable to show up for work because of acute illness of themselves or child/children. They must inform the Program Administrator Shari Johnston (612-626-5589), and the rotation they’re on (contact numbers are on Moodle). They should speak in person with either the residency coordinator, or someone in their rotation.

Days of absence due to illness are considered paid leave up to ten (10) days per year. Absence due to illness exceeding ten (10) work days in an academic year will be charged as vacation. There is no carryover from preceding years. In the event that a resident has exhausted all of his/her vacation leave, this time will be charged as unpaid leave. **While on unpaid leave, the resident is responsible for payment of any insurance (residents on unpaid leave will be billed monthly).**

**Other Leaves**

**Personal Leave of Absence**

If vacation time is used up for the year, and upon the approval of the Program Director, a Resident may arrange for a unpaid leave of absence away from the training program. **While on unpaid leave, the resident is responsible for payment of any insurance (residents on unpaid leave will be billed monthly).**

**Medical Leave**

An unpaid leave of absence for serious illness of the resident; serious health condition of a spouse, parent or child/children; shall be granted through formal request. **The Chief Residents and the Program Administrator should be concurrently notified of the leave request by e-mail as soon as possible.** The length of leave will be determined by the Program Director based upon an individual’s
particular circumstances and the needs of the department, not to exceed twelve (12) weeks in any 12-month period.

Residents taking family medical leave must submit the following documents to the Program Administrator:
- FMLA: Certification of Health Care Provider
- FMLA: Leave Response/Notification

The above forms can be accessed online in the Forms Library under “Human Resources” at http://www.fpd.finop.umn.edu/groups/ppd/documents/main/formhome.cfm. While on unpaid leave, the resident is responsible for payment of any insurance (residents on unpaid leave will be billed monthly).

**FAMILY MEDICAL LEAVE ACT (FMLA)**
FMLA is intended to allow employees to balance their work and family life by taking reasonable unpaid leave for a serious health condition, for the birth or adoption of a child, and for the care of a child, spouse, and registered same-sex domestic partner provided for by the University, or parent who has a serious health condition. The Act is intended to balance the demands of the workplace with the needs of families, to promote the stability and economic security of families, and to promote national interests in preserving family integrity.

http://www1.umn.edu/ohr/policies/leaves/fmla.html

**PARENTAL LEAVE FOR CHILDBIRTH**
A female resident may, upon written request of the Residency Program Director copied to a Chief Residents and Program Administrator, take up to six weeks paid maternity leave related to the birth of her child.

The paid leave must fall within the term of appointment and must be taken consecutively and without interruption. After using paid maternity leave and all unused vacation, any additional leave will be without pay. While on unpaid leave, the resident is responsible for payment of any insurance (residents on unpaid leave will be billed monthly).

A male resident or a partner in a registered domestic partnership may upon formal request, take up to two weeks paid paternity/partnership leave related to the birth of a child. The Chief Residents and the Program Administrator should be concurrently notified of leave requests by e-mail as soon as possible. All leave time must fall within the term of appointment and must be taken consecutively and without interruption. After using all unused vacation, any additional leave will be without pay. While on unpaid leave, the resident is responsible for payment of any insurance (residents on unpaid leave will be billed monthly).

Disabilities associated with childbirth and pregnancy will be treated like any other disability.

**PARENTAL/ DOMESTIC PARTNERSHIP LEAVE - ADOPTION**
A female resident may, upon request, may take up to two weeks paid leave and up to two weeks leave without pay related to the adoption/birth of a child. All leave time must fall within the term of appointment. All leave must be taken consecutively and without interruption. After using all unused vacation, any additional leave will be without pay. While on unpaid leave, the resident is responsible for payment of any insurance (residents on unpaid leave will be billed monthly).

A male resident or partner in a registered domestic partnership may, upon request, take up to two weeks paid leave related to the adoption of a child. All leave time must fall within the term of appointment. All leave must be taken consecutively and without interruption. After using all unused vacation, any additional leave will be without pay. While on unpaid leave, the resident is responsible for payment of any insurance (residents on unpaid leave will be billed monthly).

**ACADEMIC/ PROFESSIONAL LEAVE**
Paid academic leave may be granted at the discretion of the Program Director and should be pre-approved for a specific number of days and requires appropriate documentation (e.g. submission of the accepted
academic abstract in the case of presenting at a scientific meeting). Considerations for granting approval will include resident academic standing, availability of time-off, and value of the leave to the resident and the program as determined by the Program Director.

Paid academic leave may include leave from work during:
1. Presentations at scientific meetings, 3 days total (one to present and two travel days (see “Conference Travel Policy”),
2. Chief residents at the AUR (full conference) and RSNA (3 days),
3. ACR by resident ACR representatives (R2) and first year residents (R1),
4. Fellowship/Job interviews; total of 5 days during residency,
5. Review course for the review dates only (R3),
6. Away rotations (usually 4 weeks). (RL4 only)

MILITARY LEAVE
Military leave is granted in full accordance with State and Federal regulations. The Program Director must be promptly notified in writing when a Medical Resident requires military leave.

JURY/WITNESS DUTY
Jury duty and court leave will be authorized consistent with State and Federal Court requirements. The Program Director must be promptly notified in writing when a Medical Resident requires jury duty or court leave.

BEREAVEMENT LEAVE
A resident may request bereavement leave and either sick or vacation time must be used. The Chief Residents and the Program Administrator should be concurrently notified of leave requests by e-mail as soon as possible.

INTERVIEW TIME OFF
A R3 resident may take up to five (5) calendar days of non-vacation time to interview for a job or fellowship position.

POLICY ON EFFECT OF LEAVE FOR SATISFYING COMPLETION OF PROGRAM
As is required by the American Board of Radiology (ABR), all resident leave is reported to the ABR on an annual basis. Per the ABR, the following terms in regards to leave must be met in order to be eligible to sit for the Board examination:

“Leaves of absence and vacation may be granted to residents at the discretion of the Program Director in accordance with local rules. Within the required period(s) of graduate medical education, the total such leave and vacation time may not exceed:
• Six (6) calendar weeks (30 working days) for residents in a program for one year,
• Twelve (12) calendar weeks (60 working days) for residents in a program for two years,
• Eighteen (18) calendar weeks (90 working days) for residents in a program for three years, or
• Twenty-four (24) calendar weeks (120 working days) for residents in a program for four years. If a longer leave of absence is granted, the required period of graduate medical education must be extended accordingly.”
**Holiday Schedule**

Holiday schedules vary, depending on the institution. When rotating to a particular site, the holiday schedule for that institution must be followed.

<table>
<thead>
<tr>
<th>Date</th>
<th>Holiday</th>
<th>UMP</th>
<th>HCMC</th>
<th>VAMC</th>
</tr>
</thead>
<tbody>
<tr>
<td>Friday, July 3rd</td>
<td>Independence Day (Observed)</td>
<td>Closed</td>
<td>Closed</td>
<td>Closed</td>
</tr>
<tr>
<td>Monday, Sept. 7th</td>
<td>Labor Day</td>
<td>Closed</td>
<td>Closed</td>
<td>Closed</td>
</tr>
<tr>
<td>Monday, Oct. 12th</td>
<td>Columbus Day</td>
<td>Open</td>
<td>Open</td>
<td>Closed</td>
</tr>
<tr>
<td>Wednesday, Nov. 11th</td>
<td>Veterans Day</td>
<td>Open</td>
<td>Open</td>
<td>Closed</td>
</tr>
<tr>
<td>Thursday, Nov. 26th</td>
<td>Thanksgiving</td>
<td>Closed</td>
<td>Closed</td>
<td>Closed</td>
</tr>
<tr>
<td>Friday, Dec. 25th</td>
<td>Christmas (Observed)</td>
<td>Closed</td>
<td>Closed</td>
<td>Closed</td>
</tr>
<tr>
<td>Friday, Jan. 1st</td>
<td>New Year’s Day (Observed)</td>
<td>Closed</td>
<td>Closed</td>
<td>Closed</td>
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<tr>
<td>Monday, Jan. 18th</td>
<td>ML King Day (Observed)</td>
<td>Open</td>
<td>Open</td>
<td>Closed</td>
</tr>
<tr>
<td>Monday, Feb. 15th</td>
<td>Presidents’ Day</td>
<td>Open</td>
<td>Open</td>
<td>Closed</td>
</tr>
<tr>
<td>Monday, May 30th</td>
<td>Memorial Day</td>
<td>Closed</td>
<td>Closed</td>
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The residency program also follows a schedule of Block-out Dates. These are dates during which staffing shortages are anticipated. Leave requests will not be granted during these periods without specific approval from the Program Director.

**BLOCK-OUT DATES**

<table>
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<th>END</th>
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<td>New Residents and Fellows</td>
<td>July 1st, 2015</td>
<td>July 7th, 2015</td>
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<td>Radiological Society of North America Meeting</td>
<td>November 29th, 2015</td>
<td>December 4th, 2015</td>
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<td>Duke Review Course</td>
<td>March 5th, 2016</td>
<td>March 10th, 2016</td>
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<tr>
<td>Association of University Radiologists Meeting</td>
<td>March 29th, 2016</td>
<td>April 1st, 2016</td>
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<td>ACR Leadership Meeting</td>
<td>May 15th, 2016</td>
<td>May 19th, 2016</td>
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<td>ABR Core Exam</td>
<td>June 6th, 2016</td>
<td>June 7th, 2016</td>
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<td>June 9th, 2016</td>
<td>June 10th, 2016</td>
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<tr>
<td>Terminal Leave/Vacation</td>
<td>June 27th, 2016</td>
<td>June 30th, 2016</td>
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**DEPARTMENTAL POLICY REGARDING PREGNANCY FOR RESIDENTS**

The Department of Radiology will not differentiate in the treatment of potentially pregnant or confirmed pregnant residents. Specifically, on-call and fluoroscopy assignments will not be modified solely on the basis of a female resident being potentially pregnant or pregnant, in accordance with the official position of the American Association of Women in Radiology which states: “On the basis of available data, the elimination of fluoroscopy at any time during pregnancy cannot be justified on scientific grounds. Rationally, women of child-bearing age who enter the specialty of radiology should be willing to accept the theoretical risks involved in fluoroscopy.”

**NOTARY SERVICE**

- **Shari Johnston**
  - Phone: 612.626.5589
  - Office: Mayo B-211
- **Pam Hansen**
  - Phone: 612.626.6638
  - Office: Mayo B-226

**RESIDENT EXERCISE ROOM**

The University of Minnesota Medical Center, Fairview Medical Executive Committee has graciously provided an exercise facility for use by University of Minnesota residents and fellows.

**Location:**
- Room C-496 Mayo Memorial Building
- (Locker rooms/showers are located directly across the hall)

**Hours:**
- The facility is open 24 hours a day, 7 days a week

The space also includes a small kitchenette area with refrigerator, microwave, coffeemaker and hot/cold water dispenser.
SHUTTLE SERVICE - INTERCAMPUS
A shuttle service is available between the Riverside and University campuses from 5:20 am. to 8:30 pm. See the shuttle schedule near the boarding locations on each campus. The shuttle picks up and drops off at the front entrance at Harvard Street SE and Masonic Building on the University campus and in the West circle entrance outside Subway restaurant on the Riverside campus. FALL, SPRING & SUMMER SEMESTERS

<table>
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<tr>
<th>Schedule</th>
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<tbody>
<tr>
<td>Monday–Friday (No service during weekends, breaks and holidays.)</td>
<td>every 15 minutes</td>
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<tr>
<td>Monday–Friday (Fall and Spring Semester ONLY)</td>
<td>every 30 minutes</td>
</tr>
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HEALTH AND DENTAL INSURANCE COVERAGE
Please refer to Institutional Policy Manual for further information or Office of Student Health Benefits http://www.shb.umn.edu/twincities/residents-fellows-interns/index.htm

FLEXIBLE SPENDING ACCOUNT
Please refer to Institutional Policy Manual for further information or Office of Student Health Benefits http://www.shb.umn.edu/twincities/residents-fellows-interns/index.htm

LONG-TERM DISABILITY INSURANCE COVERAGE
Please refer to Institutional Policy Manual for further information or Office of Student Health Benefits http://www.shb.umn.edu/twincities/residents-fellows-interns/index.htm

SHORT-TERM DISABILITY INSURANCE COVERAGE
Please refer to Institutional Policy Manual for further information or Office of Student Health Benefits http://www.shb.umn.edu/twincities/residents-fellows-interns/index.htm

PROFESSIONAL LIABILITY INSURANCE COVERAGE
Policy Number for RUMINCO: RUM-1005-14
For further information please contact the Risk Management Office: http://www.gme.umn.edu/prod/groups/med/@pub/@med/@gme/documents/content/med_content_428163.pdf
Office of Risk Management and Insurance
1300 South 2nd Street
Suite #208 WBOB
Minneapolis, MN 55454
Phone: 612-624-5884

LIFE INSURANCE COVERAGE
Please refer to Institutional Policy Manual for further information or Office of Student Health Benefits http://www.shb.umn.edu/twincities/residents-fellows-interns/index.htm

VOLUNTARY LIFE INSURANCE COVERAGE
Please refer to Institutional Policy Manual for further information or Office of Student Health Benefits http://www.shb.umn.edu/twincities/residents-fellows-interns/index.htm

INSURANCE COVERAGE CHANGES
Please refer to Institutional Policy Manual for further information or Office of Student Health Benefits http://www.shb.umn.edu/twincities/residents-fellows-interns/index.htm

WORKER’S COMPENSATION
University employees must promptly report on-the-job injuries/illnesses to the employee's supervisor. Within 24 hours of the employee's report the supervisor shall complete the First Report of Injury and the Employee Incident Report forms and forward these to the University's vendor and a copy to the University Workers' Compensation Department. http://policy.umn.edu/Policies/hr/Benefits/WORKERSCOMP.html
MEAL PROGRAM
Residents on duty have access to adequate and appropriate food services at all institutions. MHealth PGY3-5 Residents on-call are entitled to a fixed monthly meal allocation for each meal while on-call and are given swipe cards once a year beginning July 1st for use while on call at MHealth. Swipe cards are honored ONLY at the Bridges Cafeteria (University campus) or the East Side Market Café (Riverside campus).

The balance on the card can be obtained by asking the cashier at the register. When the balance reaches $0.00, the cashier will collect the card from the resident so that the card can be reprogrammed. Resident should contact GME Coordinator at HCMC and MVAHCS regarding their meal card program.

LAUNDRY SERVICES
Two lab coats will be provided at the beginning of your residency. If you should require a replacement lab coat during your residency program, please contact, Shari Johnston, Program Administrator.

No laundry services are provided for Radiology residents. Scrubs are provided at all three institutions when you are on an appropriate rotation. These are the property of the institutions and are to be used for this purpose only.
- MHealth: Scrubs are available on a sign-out basis by using your MHealth identification badge in Room J2-104. The required bar code for the backside of your ID badge is provided by Kathy Monitor in Linen Services: 612-273-5793.
- HCMC: Scrubs are available by placing a $10 deposit per pair (3 pair maximum) at the Cashier (First floor, North block), and then bringing your voucher to Outpatient Supply (Third floor, North block). In order to be reimbursed for your deposit, you must return your scrubs to Outpatient Supply.
Blue scrubs are available in the Radiology Department, but only for use in Special Procedures or the Operating Room.
- MVAHCS: Lab coats and scrubs are available on a sign-out basis by providing your MVAHCS identification badge. Residents may pick up and return lab coats and scrubs directly to the VA laundry, first floor, Room 137A, Ext 2592, where they were obtained.

PARKING
MHealth
The Department provides general parking at Oak Street Ramp C for residents. Residents receive a parking card at the beginning of their R1 Year. If you encounter a problem with your parking card, contact Shari Johnston, Program Administrator, at 612-626-5589. Resident is responsible for replacement cost ($65).

Do not take your key card into any MRI facility, as these units will erase the card’s memory. Exiting parking facility without scanning card will automatically result in your card being locked.

Umach
Residents in programs based on the West bank campus or residents completing a rotation on the West bank campus must go to the parking office to activate their parking. There is a $25 refundable deposit for parking.

All residents must have a MHealth ID badge in order to activate parking. Please bring a photo ID with you if you need to acquire a Fairview or Umach ID badge. $25 refundable deposits must be made by cash or credit card at our offices, checks are not accepted.

Resident day-time parking on the West bank campus will be located in the Yellow ramp. Day-time parking is not available on the East bank campus in the Fairview patient/visitor ramp.
After hours parking begins at 4:30pm Monday through Friday and is available all day/night on weekends. After hours parking is available in the East bank patient visitor ramp and in the red, yellow, and purple ramps on the West bank campus. Individuals that enter the ramps during after-hours will be able to exit the ramp at any time.

To receive the refundable deposit the resident must go to the parking office in person to receive their refund.

**PARKING OFFICE HOURS**

**EAST BANK** parking office is located in the Mayo Building, Room B-340. The office hours are Monday thru Friday, 7:30am-3:30pm and are closed from 1-2pm.

**WEST BANK** parking office is located in the Riverside East Building, Room MB218. The office hours are Monday thru Friday, 8:00am – 4:00pm.

Questions and/or issues regarding parking at MHealth may be directed to the MHealth GME Office at 612-273-7482.

**HCMC**

Every resident can pick up his/her own parking card, with a $50 deposit. You will be allowed to keep it for the duration of your Radiology Residency.

You will have 30 days to return the card to the Parking/Security Office at the end of your residency. Their hours are: 6:00 am to 3:30 pm. forfeit. If you do not return it within the 30-day period, you will forfeit the full deposit.

**VAMC**

Residents may park in either the general parking lot or in the gated physician lot using VA ID badge

**EDUCATIONAL FUND**

- RL1 – RL4 residents receive access to Requisites and Case Reviews online.
- RL1 and RL2 residents will receive $500 each year for a total of $1,000 during residency. They may use funds for medical books, professional journals, travel expenses to AIRP and purchase of eReader (Refer to Tablet Policy below).
- RL3 residents may also include travel to Board review courses.
- RL3 residents may also include travel to ABR Exam.
- Residents beyond RL4 are considered to be in fellowship positions and are not eligible for the reimbursement program.

The University fiscal years run from July 1st through June 30th of the following year. Funds will be carried from one year to the next.

Residents submit receipt(s) to Shari Johnston, Program Administrator, for reimbursement **within 30 days of expense incurring**. Residents are NOT reimbursed for tax.
**TABLET POLICY - UNIVERSITY MEDICAL SCHOOL**

**Background**

All capital and non-capital equipment, bought with University funds, belongs to the University. Equipment such as computers, tablets (IPADS), or other equipment that has the ability to hold data, must be purchased through, or encrypted by, the AHC IS department.

**Departmental purchases**

If a tablet is purchased with departmental funds, the department must ensure there is a business purpose for the purchase and the tablet will have minimal personal use.

If a department requires residents / fellows to use tablets (typically to deliver some portion of the program’s curriculum) and, therefore, purchases the tablets; and residents / fellows are allowed to keep the tablets when they leave the program, then the length of time between when the student received the tablet and graduation (or other departure) must be taken into consideration. University Inventory Services has assigned a 3-year useful life to tablets. If a resident / fellow leaves the program (graduation or other reason) in less than three years, the department must charge them for the remaining value of the tablet. After 3 years, the de minimis rule is in effect, which allows the department to give a tangible item to faculty/staff/students, with a value of less than $100, and not have it taxable to the individual.

**Faculty/Staff Business expense purchases**

If faculty/staff purchase a tablet, with funds from their business expense accounts, the reimbursement will be taxable to the individual, through payroll. The reason for this is there is a high probability that mobile, “connective” devices like tablets will be utilized for personal purposes. Recording the purchase as a taxable event (in effect, it is compensation) allows the faculty/staff to own the tablet instead of the University. An individual will be allowed to purchase one IPAD/Tablet per year with funds from their business expense account.
SECTION III  INSTITUTIONAL RESPONSIBILITIES

SECTION IV DISCIPLINARY AND GRIEVANCE PROCEDURES

DISCIPLINE/DISMISSAL FOR ACADEMIC REASONS
Trainee academic performance is determined by a review of evaluations and examination scores (see Section IV: Steps in Evaluation Process). If resident performance is felt to be below an acceptable level, discipline and possible dismissal will follow guidelines set forth in the Institutional Policy Manual (see Disciplinary and Grievance Procedures).

Procedures: The resident/fellow will be given verbal notice of performance deficiencies by the Program Director, an opportunity to remedy deficiencies, and the notice of possible dismissal or contract non-renewal if the deficiencies are not corrected, and a record of this will be placed in the trainee’s file.

When the resident continues to demonstrate a pattern of marginal or unsatisfactory academic performance, they will be placed on academic probation as specified in the Institutional Manual. A Radiology Graduate Medical Education Committee will meet to discuss the outcome of the probation, and may recommend: Removal from probation with a return to good academic standing; continued probation with new or remaining deficiencies sited; Non-promotion to the next level of training; Contract non-renewal and/or dismissal.

DISCIPLINE/DISMISSAL FOR NON-ACADEMIC REASONS
Discipline/dismissal for non-academic reasons will follow the guidelines set forth in the Institutional Policy Manual.

GRIEVANCE PROCEDURE AND DUE PROCESS
Refer to the Institutional Policy Manual
SECTION V GENERAL POLICIES AND PROCEDURES

PROGRAM GOALS AND OBJECTIVES
The objective of the residency program is to provide a high quality graduate medical educational experience in diagnostic radiology.

PROGRAM CURRICULUM
Can be located on the department website as well as Resident Moodle.

PROGRAM SCHEDULES
The annual master resident rotation schedule is prepared in May by the Chief Residents who take into consideration residents’ ranks and plans for upcoming life events rotation and site availability, and institutional funding constraints. No resident is assigned to a rotation for other than meeting their educational goals. The final schedule requires the approval of the Program Director and Department Chair. The Program Director may change the annual master schedule without notice, as necessary to meet Program needs and obligations.

Program schedules are posted on Google Schedule.

FOREIGN ELECTIVE POLICY
Up to four weeks of academic leave may be approved (with pay) for acceptable foreign radiology study aboard during residency as RL4. The decision to grant leave will include, but not limited to the following factors:
1. Resident academic performance;
2. Department needs; and
3. Value of educational experience including qualification of faculty mentor.

RL4’s wishing to pursue a foreign elective rotation must submit an email to Shari Johnston, Program Administrator, indicating:
1. Expected academic outcome;
2. Humanitarian component;
3. Timeframe;
4. Letter of support from sponsoring site; and
5. Letter of approval from Program Director or Chair.

Upon completion of rotation, resident will be required to give a Grand Rounds on both the academic and humanitarian experience.

PROGRAM REQUIREMENTS
All residents are governing by the requirements in both the Institutional and Program Manual.

The Graduate Medical Education Committee, chaired by the Program Director, evaluates the progress of the residents, and makes recommendations for advancement or disciplinary actions. The Program Director with advice from Graduate Medical Education Committee members, determines candidates for admission to the training program, residents’ progress in the program, and residents satisfactory completion of graduation requirements.

Residents are expected to successfully complete their monthly rotations.
Residents are required to comply in a timely manner with administrative directives including those from the Program Coordinator. This includes, but not limited to:

- Proper notification of all time away;
- Monthly submission of duty hours in RMS;
- Prompt completion of RMS evaluations and curriculum review;
- Record conference attendance in RMS - Only those on call, post-call, ill, on leave, or attending the AlRP Pathology will be considered to have excused absences;
- Residents are required to attend Grand Rounds and Core Curriculum Conferences on days they are at work;
- RL3's are required to attend Physics lectures on days they are at work, regardless of which institution they are working at;
- Reading/Studying during regular work hours – must be patient care related;
- Compliance to USMLE policy (see below);
- RL1s - RL3's will take the annual ACR In-Service Exam;
- All resident must enter their IR procedures into RMS “Procedure Logger”;
- In order to ensure residents are eligible for certification by the ABR, the Program requires residents to meet ABR requirements for certification, which can be reviewed at http://www.theabr.org. All RL1 residents are required to register with the American Board of Radiology for certification in the required time frame unless they have been prospectively excused from this by the Program Director; and
- Graduation certificates are awarded to residents who have successfully completed their RL1 – RL4 training, who are making satisfactory progress in completing their RL4 year as determined by the Program Director, and who are not expected to extend their RL4 year more than 3 months.

**ACR IN-SERVICE EXAM POLICY**

- RL1s - RL3s are required to take the Annual ACR In-Service Exam.
- Week of ACR Exam will be blocked for all vacation requests.
- Non-compliance will be subject to administrative review with Program Director.

**USMLE STEP 3 POLICY:**

All trainees must provide their program with documentation of a passing score on the United States Medical Licensing Examination (USMLE) Step 3 or an equivalent examination that qualifies for medical licensure (i.e. COMLEX) by January 1 of their PGY-2 year.

Trainees who do not notify their program of a passing score by January 1 of their PGY-2 year forfeit their continuing position in the training program and are subject to contract non-renewal. Upon application to the program, trainees who transfer into a University program (PGY-3 and beyond) are required to provide documentation of a passing score on their examination.

**TRAINING/GRADUATION REQUIREMENTS**

This program adheres to the training requirements set forth by the American Board of Radiology. These requirements can be reviewed at http://www.theabr.org.

Program Directors, along with the Graduate Medical Education Committee, a faculty committee of the Department of Diagnostic Radiology with representatives from MHealth, UMACH, HCMC and MVAHCS, has the responsibility to evaluate candidates for admission to the training program, to evaluate trainees in the program, to promote those who are progressing satisfactorily and, ultimately, to make recommendations that trainees have met the criteria established by the faculty for completion of our training programs. The Graduate Medical Education Committee meets specifically at least twice per year for the purpose of evaluating the progress of each trainee, to make recommendations for evaluating his/her progress, and to make recommendations for advancement. These meetings are typically held in the fall and spring.
Graduation certificates are awarded to residents who successfully complete all of the Program requirements, have shown satisfactory progress toward the competent, independent practice of Diagnostic Radiology, and demonstrate professional and personal attributes dedicated to the life-long learning process associated with the practice of medicine.

Program requirements are:
- Application for and successful completion of the requirements to take the ABR Core Exam
- Successful completion of all scheduled rotations
- Successful passage of mini-boards examinations during RL1 year
- RL1 – RL3 residents must take the American College of Radiology (ACR) In-training examination.

**RESIDENT RESEARCH PROJECTS**
Residents are required to identify a faculty mentor on all projects they undertake. An email should be sent to the Program Administrator, Shari Johnston, noting the project’s scope and copying the faculty mentor.

**NUCLEAR MEDICINE DIDACTICS**
Per ACGME requirement, 80 hours of Nuclear Medicine didactics may be included into the 700 hour requirement.

- Diagnostic Radiology Physics, Instrumentation, and Radiation Safety;
- Patient & Medical Personnel Safety;
- Chemistry of by-product material for medicinal use (senior radio pharmacy trip);
- Biologic and Pharmacologic actions of materials administered in diagnostic and therapeutic procedures;
- Didactic instruction (work and experience)- ordering, receiving unpacking radioactive material safely, etc, 6:30 to 7:30 AM each morning while on Nuclear Medicine rotations; and
- Radiation Safety and Radiation Protection RSNA Learning Modules.

**RSNA – PHYSICS ONLINE MODULES**
R1 residents are required to complete all the RSNA Physics online modules and submit a certificate of completion to Shari Johnston, Program Administrator.

**ACR – PROFESSIONALISM AND ETHICS ONLINE MODULES**
Residents are required to complete the ACR Professionalism and Ethics online modules and submit a certificate of completion to Shari Johnston, Program Administrator.

**ENTERING IR PROCEDURE LOGGER**
All residents are required to enter their IR procedures into the RMS Procedure Logger Module in order to comply with ACGME ruling.

Reports will be run quarterly to ensure residents are entering their hours. The Program Director will review procedures during the semi-annual reviews.

**ADMINISTRATIVE CHIEF RESIDENTS**
Each year three chief residents are voted in by staff and their peers to act as a liaison between residents, sites, Chair and Program Director. Administrative chief residents will bring forth innovative ways to further program goals and objectives. They also facilitate resolution of issues, concerns and conflicts that may arise.
SOCIAL MEDIA USE POLICY

It is recognized that social networking websites and applications, including but not limited to Facebook, LinkedIn, Twitter and blogging sites are an effective and timely means of communication and/or an exchange of ideas. However, trainees who use these websites and other applications must be aware of the importance of securing their web sites so that only trustworthy “friends” have access to the websites/applications. Trainees must also be aware that posting certain information is prohibited (i.e. protected health information, research outcomes from another faculty, resident or fellow, etc). Trainees who violate University policies may be subject to adverse academic actions that could include a letter of reprimand, probation or dismissal from the training program.

PROCEDURE:
All University of Minnesota residents and fellows are required to follow the policies set forth by the University of Minnesota’s University Relations Office. Please review the sites below to familiarize yourself with the social networking rules and regulations of the University of Minnesota.
2) Graphic Standards: http://www.brand.umn.edu/standards/index.php

ACGME CORE COMPETENCIES AND MILESTONES

All University of Minnesota Medical School Residency/Fellowship training programs define the specific knowledge, skills, attitudes, and educational experiences required by the ACGME/RRC to ensure its residents/fellows demonstrate the following:

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 (e.g., epidemiological and social-behavioral) 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 ethical 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 for health care and the ability to effectively call on system resources to provide care that is of optimal value.

MILESTONES

As the ACGME began to move toward continuous accreditation, specialty groups developed outcomes-based milestones as a framework for determining resident and fellow performance within the six ACGME Core Competencies.

What are Milestones?
Simply defined, a milestone is a significant point in development. For accreditation purposes, the Milestones are competency-based developmental outcomes (e.g., knowledge, skills, attitudes, and performance) that can be demonstrated progressively by residents and fellows from the beginning of their education through graduation to the unsupervised practice of their specialties.

Who developed the Milestones?
Each specialty’s Milestone Working Group was co-convened by the ACGME and relevant American Board of Medical Specialties (ABMS) specialty board(s), and was composed of ABMS specialty board representatives, program director association members, specialty college members, ACGME Review Committee members, residents, fellows, and others.

Milestones serve important purposes in program accreditation
- Allow for continuous monitoring of programs and lengthening of site visit cycles
- Public Accountability – report at a national level on aggregate competency outcomes by specialty
- Community of practice for evaluation and research, with focus on continuous improvement of GME
For educational (residency/fellowship) programs, the Milestones will:

- Provide a rich descriptive, developmental framework for clinical competency committees
- Guide curriculum development of the residency or fellowship
- Support better assessment practices
- Enhance opportunities for early identification of struggling residents and fellows

For residents and fellows, the Milestones will:

- Provide more explicit and transparent expectations of performance
- Support better self-directed assessment and learning
- Facilitate better feedback for professional development

For details on Milestones


**Duty Hours**

Duty hours are defined as all clinical and academic activities related to the training program, i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences. Duty hours Do not include reading and preparation time spent away from the duty site.

Federal regulations mandates that GME programs account for all resident hours worked in order to maintain Medical Education funding. In addition to these federal regulations, ACGME also mandates programs monitor duty hours to ensure compliance with duty hour requirements. This means that residents must complete an online timecard of their hours worked in order to be compliant with these mandates and continue funding, accreditation, and flexibility of the program.

Duty hour violations are prohibited. Residents are responsible for making the program aware of impending violations before they occur.

**Duty Hour Approval Policy & Procedure**

The Minnesota Medical Council of Graduate Medical Education (MMCGME) mandates the University of Minnesota use RMS to track resident duty hours. The department also uses RMS to distribute evaluation. All activities performed by residents during their rotations are documented in an online system called RMS. The data held within RMS is used to document and reconcile payments with the institutions where the fellows/residents rotate. Residents are required to enter their duty hours, review for accuracy and approve.

Residents are responsible for making any changes such as; start time, duration, applying activities they participated in and indicating those activities they did not participate in with “Did Not Work”.

Maintaining your duty hours is not only a GME requirement it is also a requirement for the completion of your degree. Note: Failure to ensure accuracy of your rotation activities is considered an act of Medicare fraud.

- Duty hours for the previous month are to be entered by 7AM on the first working day of the month.
- All fixes identified by Program Administrator must be corrected by the following morning.
  
  If the above do not occur:
  
- Residents on a MHealth rotation will have their parking privileges revoked beginning the next day and will be in effect until the residency office has cleared you.
• Residents on rotation at HCMC or MVAHCS will have their book funds debited in the amount of $25.00 per day beginning the next day and will remain in effect until the residency office has cleared you. If resident does not have funds remaining in their book fund account vacation will be revoked or call will be applied at the discretion of Program Director.

• R4s will have a letter placed in their permanent file reflecting a lack of professionalism if pattern continues.

ON-CALL ACTIVITIES
The objective of on-call and night float activities is to provide residents with emergency radiology experience, and is scheduled by the Chief Residents after approval of the Residency Program Director and Chairman. Residents are generally expected to take their call as assigned.

It’s recognized by the department that occasionally a scheduling conflict may arise, and then residents may exchange call with another appropriate resident provided it does not create duty hour violations, and chief residents and the program administrator are informed of the exchange. Residents should check with chief residents prior to exchanging call whenever possible. Specifically, the buying and selling of call between residents is prohibited.

ON-CALL ROOMS
An on-call room within the Department of Radiology is available to residents taking departmental call or night float at both MHealth and HCMC, where residents receive their in-house on-call experience. Any questions or concerns regarding departmental on-call rooms should be directed to your Chief Residents.

On-call residents are also eligible to use one of 18 Mayo Building call rooms provided by MHealth. All rooms have punch code security access changed daily, and a security monitor on duty daily from 2:00 PM – 7:00 AM. All rooms have a desk, television, radio clocks and air conditioning.

Check-in can only occur during designated check-in hours: 2:00 PM – 7:00 AM.
• Go to the check-in desk located in the Resident Lounge (Mayo C-496). The check-in desk is staffed by a security monitor during set hours seven (7) days/week and will require you to present your ID badge.
• The security monitor will assign you a room, the room access code, and the locker room and lounge access codes.
• All individuals must be out of their room by 8:00 AM. Housekeeping will begin cleaning by 7:00 AM. If you wish to sleep past 7:00 or 8:00 AM, make sure your “Do Not Disturb” sign is indicated on your door.

SUPPORT SERVICES
A full range of patient support services are provided in a manner appropriate to and consistent with educational objectives and patient care. These include but are not limited to Care Management Services, Cardiopulmonary Services, Employee Health Service, Health Information Management, Infection Control, Laboratory Medicine and Pathology, Nursing Administration, Nutrition Services, Patient Relations, Patient Transport, Pharmacy Services, Radiology Film File Services, Rehabilitation Services, Security Services, Social Services, Spiritual Health Services, and Shuttle Service between the Riverside and University campuses.

LABORATORY / PATHOLOGY / RADIOLoGY SERVICES
Federal and state regulations and regulatory agencies mandate competency validation for testing personnel (including physicians), documentation, quality assurance, quality control, etc. The regulations cover hospitals, clinics, physicians’ offices, nursing homes, and any site where testing is performed. Testing performed by physicians, practitioners, nursing staff, and laboratorians must meet regulatory guidelines. Failure to comply with the mandates can lead to suspension, revocation, or limitation of certification and denial of reimbursement.
MEDICAL RECORDS - HEALTH INFORMATION MANAGEMENT
A medical record system that documents the course of each patient's illness and care is available at all times to support quality patient care, the education of residents, quality assurance activities, and provide a resource for scholarly activity. Additionally a provision of information systems is made for timely retrieval of medical records and radiologic information. To access please contact: MHealth Information Management Office at 612-626-3535.

SECURITY / SAFETY
Security and personal safety measures are provided to residents at all locations including but not limited to parking facilities, on-call quarters, hospital and institutional grounds, and related clinical facilities (e.g., medical office buildings).

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<tr>
<th>SECURITY</th>
<th>MHealth</th>
<th>UMACH</th>
<th>HCMC</th>
<th>MVAHCS</th>
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RADIATION BADGES
Radiation badges must be worn in controlled radiation areas under penalty of State law. You may be fined by the State Health Department if found not wearing a badge during an inspection.

MHealth
New badges will be placed in your mailbox at the institution to which you are assigned on the first working day of the month. Always keep your old badges until you get a replacement. **Badges from the previous month must be returned to your mailbox by the 8th of each month.**

Under University policy, late badges will result in a fine of $50 per badge (unless replacement badges have not arrived in time to make the exchange). The amount of the fine will be deducted from your educational (“book”) fund; if adequate funds do not remain, the resident will be billed for the amount owed. Residents who plan to be away during the exchange period are required to make arrangements with someone to exchange their badges in their absence. Lost or stolen badges must be reported to Pamela Hansen at 612-626-6638 or hanse032@umn.edu.

MVAHCS
Pam Hansen, at the University, sends badges to Vance Engelstad based on the rotation schedule. Residents are expected to pick and return badges to Vance at the end of their rotation. Vance will returns badges to Pam.

Vance Engelstad
Imaging Administrative Office, 1Q-105
vance.engelstad@va.gov
612-467-2038

HCMC
Hiltje distributes and collects the old radiation badges. For those residents taking weekend Call, if the first falls on a weekend, we have a clipboard left in the ED Reading Room, where they can find them easily.

VISA POLICY
The Department of Radiology accepts trainees on a J1 visa.

The department will support an H1B visa on a case by case basis with Department Head approval.
MOONLIGHTING
This policy does not acknowledge in any way, any departmental acknowledgement of the resident’s ability to satisfactorily perform any moonlighting activities. Malpractice insurance is the responsibility of the resident involved. Credentialing is up to the party hiring the resident. Residents are not required to engage in moonlighting.

Because residency education is a full-time endeavor, moonlighting must not interfere with the ability of the resident to achieve the goals and objectives of the educational program.

Residents are required to get prospective permission from the Program Director of their moonlighting activities. They shall email the Program Administrator the dates, times and locations of all moonlighting activities and will become a part of the residents file.

Moonlighting activities will not be allowed to conflict with the scheduled and unscheduled time demands of the educational program and its facility. The resident’s performance will be monitored for the effect of these activities upon performance and that adverse effects may lead to withdrawal of permission.

Both internal and external moonlighting must be counted toward the 80-hour weekly limit on duty hours.

Residents on J1 visas are NOT permitted to be employed outside the residency program.

A resident on an H-1B visa wishing to moonlight must obtain a separate H1-B visa for each facility where the resident works outside the training program.

J 1 Visa Holders: In accordance with ECFMG and GME policies (referenced below), J1 Visa holders are NOT allowed to be EPIC trainers, because they may receive compensation only for activities that are part of the designated training program. (The Form DS-2019 states the training program name and the allowed stipend amount.) Per the ECFMG Memo on Moonlighting, “an exchange visitor who engages in unauthorized employment shall be deemed to be in violation of his or her program status and is subject to termination as a participant in an exchange visitor program.”

H-1B Visa Holders: Per the GME Visa Sponsorship Policy: A resident on an H-1B visa wishing to moonlight must obtain a separate H-1B visa for each facility where the resident/fellow works outside the training program.

SUPERVISION / GRADED RESPONSIBILITY
All patient care is supervised by qualified faculty. The Program Director ensures, directs, and documents adequate supervision of residents at all times. Residents are provided with rapid, reliable systems for communication with supervising faculty. Residents are supervised by teaching staff in such a way that the residents assume progressively increasing responsibility according to their level of education, ability, and experience.

On-call schedules for teaching staff are structured to ensure that supervision is readily available to residents on duty. The teaching staff determines the level of responsibility given to each resident/fellow. Faculty and residents are educated to recognize the signs of fatigue and adopt and apply policies to prevent and counteract the potential negative effects.

Resident participation at all of our institutions is one of active participation under direct supervision of full-time teaching staff. However, at all times, final responsibility for patient care resides with the full-time staff. In this manner, the residents receive excellent training in diagnostic radiology with an appropriate degree of responsibility.
LEVELS OF SUPERVISION

- Direct – the supervising physician is physically present with the trainee and patient
- Indirect
  - With supervision immediately available the supervising physician is physically within the hospital or other site of patient care and is immediately available to provide direct supervision
  - With direct supervision available the supervising physician is not physically present within the hospital or other site of patient care, but is immediately available by phone and/or other electronic modalities and is available to provide direct supervision
- Oversight – the supervising physician is available to provide review of procedures/encounters with feedback provided after the care is delivered

ATTENDING PHYSICIAN NOTIFICATION GUIDELINES

There are certain changes in a patient’s status or other events that should prompt a resident to contact the attending physician. The list below is not mean to be an all-inclusive list; rather it is a guideline to assist in decision-making.

Image interpretation
- Request of a staff physician.
- Interpretation that will necessitate emergent surgery (e.g. ovarian torsion, ectopic pregnancy, and clinically equivocal appendicitis).
- Uncertainty with interpretation which requires resolution prior to next scheduled staff out.
- Studies requiring attending over read or presence during the examination (e.g. US for intussusception or pyloric stenosis; pediatric fluoroscopy exams; Nm brain death).
- Request for unfamiliar fluoroscopy procedure.

Procedures
- All interventional procedures to ensure attending’s presence for procedure.
- Consultation for emergent invasive procedural requests.
- Unanticipated post procedure changes; sudden deterioration in patient status.

STEPS IN EVALUATION PROCESS

The Graduate Medical Education Committee, a Department of Diagnostic Radiology, faculty committee, has the responsibility to evaluate candidates for admission to the training program, evaluate residents in the program, promote those who are progressing satisfactorily and, ultimately, to make recommendations that they have met the criteria established by the faculty for completion of our Diagnostic Radiology Residency Program. The committee shall meet four times per year.

Resident performance is determined in many ways. Evaluation methods available to the Committee are the following:

Mini-board Exam: RL1 residents take exam during the end of their first year of training. The subject material covered is the areas of radiology in which the residents have spent time. Each resident must receive a passing grade in each of the subjects. If a resident's grade is below passing in any subject, he or she must take a make-up exam by the end of July so as to be able to go on-call as of July 1. The purpose of all the mini-board exam is to evaluate the progress of the resident.

In-training Exam: Taking the exam in January is required of all R1-R3 Radiology residents and is sponsored by the American College of Radiology (ACR).

Resident may change your appointment at no additional fee via the Prometric website 30 days or more prior to the beginning of the examination window.
However, if resident makes or changes an appointment up to 5 days before the examination window begins; they will be responsible for the $50 fee payable on the appointment website.

**Value of exam:**
1) It is similar to the examination given by the ABR;
2) Evaluation of scores in each area allows the resident to determine if they have any weak spots;
3) Reporting of the scores in percentiles allow the resident to compare their progress with that of residents in other parts of the country;
4) Overall standings are provided to the department, to compare the performance of our training program with other programs.

**Monthly and 360 Evaluations:** At the end of each clinical rotation, an evaluation of the resident’s progress is prepared by the faculty member(s) in that area. This is done via a RMS. Evaluations are accessible to residents on-line. Residents also evaluate their rotations at the end of each clinical rotation and faculty annually.

The Program Director will meet with each resident twice a year to conduct their Bi-Annual Continuation Review to go over their mini-boards results, In-training exam results, monthly & 360 evaluations, milestones; as well as to ascertain if there are any problems or concerns.

**EVALUATION SYSTEM**

Evaluations both of and by residents are essential parts of maintaining our status as an accredited residency program and producing superior resident-physicians. The information obtained from the analysis of evaluation data is instrumental in objectively assessing the quality of all aspects of the residency program and for identifying and continuously monitoring areas for improvement.

The web address for RMS is [https://www.new-innov.com](https://www.new-innov.com). If you experience any problems with logging into, please contact Shari Johnston, Program Administrator, at 612-626-5589.

**MONITORING OF RESIDENT WELL-BEING**

Both the Program Director and faculty are sensitive to the need for timely provision of confidential counseling and psychological support services to the residents.

Residents feeling fatigued or stressed are encouraged to discuss their concerns with the Program Director, or to contact the (RAP) Resident Assistance Program at 651-430-3383 or 1-800-632-7643, especially if unable to provide safe patient care.

**TRANSPORTATION IF FATIGUED**

*MHealth:* Cab vouchers will be provided by MHealth and distributed in the following way: Monday-Friday daytime hours: contact Social Work Services at University Campus: 612-273-3366. Riverside Campus: 612-372-6797.

Evenings and weekends: contact the Administrative Supervisor @ University Campus pager: 612-899-9000. Riverside Campus pager: 612-613-8497.

*HCMC:* For resident that would like a cab ride after a call shift, they should call Yellow Cab directly at 312-788-8888 and tell them that this is a non-patient transport for account HCMC, Taxi MR#612-873-3922 and give your name.
ACLS/ BLS Certification Requirements

- BLS – All residents must remain current on their Basic Life Support Training.
- ACLS – It is recommended that residents maintain Advanced Life Support Training
  Certificate must be submitted to Shari Johnston.

TRAVEL

Program Required Conference Travel

- AUR Meetings: Incoming Chief Residents (3rd year residents) and Current Chief Residents (4th year) may attend using four academic days off (duration of conference).
- RSNA: RL4 residents - 3 academic days off.
- ACR Conference: 3 academic days off for RL1 residents and ACR Reps.

Conference Travel

Radiology residents may be reimbursed for approved expenses related to presenting a talk or poster at one Radiology meeting during their residency. The resident should submit a written application with projected expenses noted as well as submission of talk or poster for review to the program coordinator. Timely submission is needed in order to be certain of time off granted and expense reimbursement prior to committing to meeting organizers.

After The Trip:

1. Receipts are required for reimbursements of $25 and above.

2. Gather all receipts and submit to Program Administrator for processing reimbursement. Program Administrator will contact resident when the University Employee Reimbursement Form is ready for their signature. **Submit within 30 days of event.**

3. If traveling to present, submit your poster/abstract to Shari Johnson.

Libraries

Institutional Libraries

University of Minnesota Biomedical Library (Diehl Hall)
- Monday through Friday: 7:00 AM - 12:00 AM
- Saturday: 8:00 AM - 8:00 PM
- Sunday: 12:00 PM - 12:00 AM

Hennepin County Medical Center
- Monday through Thursday: 7:00 AM - 9:00 PM
- Friday: 7:00 AM - 5:30 PM
- Saturday: 9:00 AM - 5:00 PM
- Sunday: 10:00 AM - 5:00 PM

Minneapolis Veterans Affairs Health Care System
- Monday through Friday: 8:00 AM - 4:30 PM
  Accessible with VAMC identification badge 24 hours per day, 7 days per week

Departmental Libraries

University of Minnesota, Radiology Department (Mayo)
  Accessible via combination lock 24 hours per day, 7 days per week
**SENIOR RESIDENT STUDY ROOM**

It is located down the hall from the current resident library in Mayo Bldg, Room-B255.

The access code to the room is: 13 25 (1 & 3 together) and (2 & 5 together).

The room is set up with wireless connection and three computers with five cubicles.

A Ultrasound Lecture Series from AIUM is installed on two of the computers.

**ROTATIONS INVOLVING REGIONS HOSPITAL**

Note the following instructions from Dr. Tashjian: - “We have a radiology/surgery/pathology/oncology conference over the noon hour that is very educational. I am gone some Thursdays, so if we have the ability to make up those days I believe it would be helpful for the resident. We begin at 7:30 AM. The first day residents need to register with Michael Boland in Medical Library, and get their name badge and parking permit. It would be helpful if they would email me (jtashjian@stpaulrad.com) about a month in advance, so that we schedule their rotation.

You must register at the Regions Hospital Graduate Medical Education Department, with Michael Boland, on their first day of service there. Upon completion of registration, residents will be given a photo ID badge/parking card and door access for their rotation.

Michael Boland’s office is located in the Medical Library, on the 2nd floor of the East Building. However, you may go directly to the Parking Office. You should park in the WEST parking ramp attached to the hospital, bring your ticket in for validation at the Parking office. Directions from the Parking Ramp are:

Take the North (Gillette Childrens Elevator) to the 2nd floor. Turn right off the elevator, walk straight towards the Central Elevators. Take a right before the elevators and the Parking Office is in the middle of the hall on the right.

If you park on Levels 5-10, you’ll have to take the Regions Hospital elevators to the 2nd floor, turn left, then a right, walk down the hall towards the North Lobby, turn right, walk straight to towards the Central Elevators, turn right just before the elevators.

The Parking office will need the photo ID badge form (attached). The Door Access form goes to Security (attached), which is one floor down from the Parking Office. You would take the elevator to the 1st floor (or walk down the staircase), turn left and the Security office is the first door on the left. They’ll have to buzz the intercom for entry. From there, the Radiology Department is also on the 1st floor.

From Security, they would take a right from Security, past the Central Elevators, turn right and walk past the Lab, the Specialties Clinic and they’ll come to the Breast Center on the right.

**Michael’s contact information is below.**

Michael Boland, Program Associate
Graduate Medical Education Mail Stop 11202F
Michael.h.boland@healthpartners.com
651-254-2864 (GME Office) 651-254-5044 (fax)

**GOAL AND OBJECTIVES FOR TEACHING MEDICAL STUDENTS**
Residents are an essential part of the teaching of medical students. It is critical that any resident who supervises or teaches medical students must be familiar with the educational objectives of the course or clerkship and be prepared for their roles in teaching and evaluation.

Here is the link to the University of Minnesota Medical School Clinical Learning Objectives

http://www.med.umn.edu/handbook/curriculum/clinical_learning_objectives.php
SECTION VI ADMINISTRATION

MHealth Department of Radiology Program administration
420 Delaware Street SE
MMC292
Minneapolis, MN 55455

<table>
<thead>
<tr>
<th>Chairman, Chuck Dietz, M.D.</th>
<th>Vice Chair of Edu Tim Emory, M.D.</th>
<th>Program Director, Jessica Kuehn-Hajder, M.D.</th>
<th>Assoc Pgm Director, Dave Nascene, M.D.</th>
<th>Program Administrator, Shari Johnston</th>
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<tr>
<td>Mayo Bldg, rm B234 MMC292</td>
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<td>RS MB647 MMC292</td>
<td>Mayo Bldg, rm B212</td>
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<tr>
<td>612.626.3345 (OFC)</td>
<td>612.626.5529 (OFC)</td>
<td>612.626.4510 (OFC)</td>
<td>612.899.8005 (PAGER)</td>
<td>612.626.5589 <a href="mailto:SHARIJ@UMN.EDU">SHARIJ@UMN.EDU</a></td>
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<tr>
<td>612.899.7591 (PAGER)</td>
<td>612.899.1424 (PAGER)</td>
<td>612.899.7869 (PAGER)</td>
<td><a href="mailto:EMORY002@GMAIL.COM">EMORY002@GMAIL.COM</a></td>
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<td><a href="mailto:JHADJER@GMAIL.COM">JHADJER@GMAIL.COM</a></td>
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HCMC Radiology Program administration
701 Park Ave South
Minneapolis, MN 55415

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<thead>
<tr>
<th>Assoc Pgm Director, Tony Severt, M.D.</th>
<th>Program Adminstrator, Pamela Thompson</th>
<th>Program Adminstrator, Hiltje Loyd</th>
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<tbody>
<tr>
<td>Office 2E-20</td>
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<td>P4-221</td>
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<tr>
<td>612.873.2036 (OFC)</td>
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<td>612.873.2036 (OFC)</td>
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<td>612.530.8654 (PAGER)</td>
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<td>612.904.4567 (PAGER)</td>
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<td><a href="mailto:SEVER025@UMN.EDU">SEVER025@UMN.EDU</a></td>
<td></td>
<td><a href="mailto:PAMELA.THOMSON@HCMED.ORG">PAMELA.THOMSON@HCMED.ORG</a></td>
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MVAHCS Radiology Program administration
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Minneapolis, MN 55417

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<th>Assoc Pgm Director, Howard Ansel, M.D.</th>
<th>Program Adminstrator, Judith Haswell</th>
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<tr>
<td>612.725.2038 (OFC)</td>
<td>612.467.2038 (OFC)</td>
</tr>
<tr>
<td>612.660.7016 (PAGER)</td>
<td>612.467.5636 (PAX)</td>
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<tr>
<td><a href="mailto:HOWARD.ANSEL@VA.GOV">HOWARD.ANSEL@VA.GOV</a></td>
<td><a href="mailto:JUDITH.HASWELL@VA.GOV">JUDITH.HASWELL@VA.GOV</a></td>
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Regions Radiology Program administration
640 Jackson Street
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<thead>
<tr>
<th>Director, Joe Tashjian, M.D.</th>
<th>Program Adminstrator, Deb Collier</th>
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<tr>
<td><a href="mailto:jTASHJIAN@STPAULRAD.COM">jTASHJIAN@STPAULRAD.COM</a></td>
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<tr>
<td></td>
<td>651.254.3456 (OFC)</td>
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<tr>
<td></td>
<td><a href="mailto:DEB.K.COLlier@HEALTHPARTNER.COM">DEB.K.COLlier@HEALTHPARTNER.COM</a></td>
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