MARRIALL UNIVERSITY SCHOOL OF MEDICINE

ORTHOPAEDIC SURGERY RESIDENCY TRAINING PROGRAM

LETTER OF AGREEMENT FOR THE COOPERATIVE TRAINING OF RESIDENTS/FELLOWS FROM MARSHALL UNIVERSITY JOAN C. EDWARDS SCHOOL OF MEDICINE (MUSOM) AND THOMAS MEMORIAL HOSPITAL (Participating Site)

This letter of agreement is an educational statement that sets forth important points of agreement between Marshall University School of Medicine (MUSOM) and Thomas Memorial Hospital. This statement of educational purpose does not affect current contracts and institutional affiliation agreements between the two institutions.

This Letter of Agreement is effective from July 1, 2012, and will remain in effect for three (3) years, or until updated, changed, or terminated by the Marshall University Orthopaedic Surgery Residency Program and/or Thomas Memorial Hospital (TMH). Such changes must be communicated with the MUSOM Office of Graduate Medical Education.

1. Persons Responsible for Education and Supervision

   At MUSOM: Ali Oliashirazi, M.D., Program Director,

   At TMH: Manuel Molina, M.D., for orthopaedic surgery

The above mentioned people are responsible for the education and supervision of the residents/fellows while rotating at Thomas Memorial Hospital.

2. Responsibilities

The faculty at Thomas Memorial Hospital must provide appropriate supervision of residents/fellows in patient care activities and maintain a learning environment conducive to educating the residents/fellows in the ACGME competency areas. The faculty must evaluate resident performance in a timely manner during each rotation or similar educational assignment and document this evaluation at completion of the assignment.

3. Content and Duration of the Educational Experiences

The content of the educational experiences has been developed according to ACGME Residency/Fellowship Program Requirements and are delineated in the attached goals and objectives for each rotation.
As program director, Dr. Ali Oliashirazi is ultimately responsible for the content and conduct of the educational activities at all sites, including Thomas Memorial Hospital. The program director, Participating Site director and the faculty are responsible for the day-to-day activities of the residents/fellows to ensure that the outlined goals and objectives are met during the course of the educational experiences.

Rotations may be in two (2) week blocks, but generally rotations are a month in duration.

The day-to-day supervision and oversight of resident/fellow activities will be determined by the specialty service where they are assigned. Vanessa Goldman, Program Coordinator, is responsible for oversight of some resident/fellow activities, including coordination of evaluations, arrangements of conferences, sick leave, annual leave and benefits.

4. Assignments

MUSOM will provide to Thomas Memorial Hospital the name of the resident(s)/fellow(s) assigned to the site, the service they will be training on and other relevant information. Residents/fellows will remain on MUSOM's payroll; remain eligible for all resident benefits, including annual leave, sick leave, and health insurance, etc. Resident's will be covered under MUSOM'S malpractice policy in the amount of one million dollars per occurrence. The policy also provides tail coverage and legal defense.

5. Responsibility for supervision and evaluation of residents

Residents will be expected to behave as peers to the faculty, but be supervised in all their activities commensurate with the complexity of care being given and the resident's own abilities and level of training. Such activities include, but are not limited to the following:

- Patient care in clinics, inpatient wards and emergencies
- Conferences and lectures
- Interactions with administrative staff and nursing personnel
- Diagnostic and therapeutic procedures
- Intensive Care unit or Ward patient care

The evaluation form will be developed and administered by the Marshall University Orthopaedic Surgery Residency Program. Residents will be given the opportunity to evaluate the teaching faculty, the clinical rotation, and Thomas Memorial Hospital at the conclusion of the assignment.
6. Policies and Procedures for Education

During assignments to Thomas Memorial Hospital, residents/fellows will be under the general direction of MUSOM's Graduate Medical Education Committee's and Marshall University Orthopaedic Surgery Residency Program's Policy and Procedure Manual, as well as the policies and procedures of Thomas Memorial Hospital for patient confidentiality, patient safety, medical records, etc.

7. Authorized Signatures

Thomas Memorial Hospital

[Signature]
Manuel Molina, MD
Site Director

[Signature]
Steven Dexter, CEO

Date 9/28/12

MUSOM

[Signature]
Ali Oliashirazi, M.D.
Chairman & Program Director

[Signature]
Paulette Wehner, M.D.
Sr. Associate Dean for GME/DIO

Date 9/30/12

[Signature]
Joseph Shapiro, M.D.
Dean

Date 9/25/12
Department of Orthopaedic Surgery

Rotation: General Community Orthopaedics PGY2

Location: Thomas Memorial Hospital, So. Charleston, WV

Length of Rotation: 1 month

Goals:
1. To develop the resident physician’s knowledge and skills for pre-operative assessment, and hospital and postoperative management of common orthopedic disorders.
2. To develop the resident physician’s knowledge and surgical skill in the treatment of common orthopedic disorders, at a level appropriate for a general orthopedist.

Competency:

Patient Care:

Objective:

1. Develop history and physical taking skills to perform an appropriate examination of patients with common musculoskeletal conditions.
2. Learn decision-making process in ordering and interpreting various diagnostic tests.
3. Develop skills to formulate rehabilitation programs for medical and postoperative patients.
4. Develop skills to correctly diagnose common musculoskeletal conditions and is able to formulate a thoughtful treatment plan for patients with common orthopaedic conditions and under the supervision of the attending orthopaedic surgeon(s).
5. Develop skills to perform aspiration and injection techniques effectively.
6. Continue to develop basic surgical skills, including:
   a. principles of sterile technique
   b. patient positioning
   c. draping
   d. proper handling of soft tissues with retractors, pick-ups, knife
   e. suturing
   f. proper handling of saw, drill, broach and reamers.
   g. indications and proper placement of drains
   h. becoming a consummate second- and subsequently first-assistant and ultimately primary surgeon

Process:
1. One month rotation on the Orthopaedic Surgery Service, and outpatient and inpatient service at Thomas Memorial Hospital.
2. Resident will accompany assigned faculty for the care of all orthopaedic patients in clinic, inpatient, outpatient and emergency room evaluation, management and procedures.
3. Care of outpatients assigned by faculty, including initial visits, treatment plan formation, and postoperative visits.
4. Participation in assigned conferences by the faculty of the Thomas Memorial Hospital Department of Orthopaedic Surgery.
Evaluation of Outcomes:
1. By faculty of the Thomas Memorial Hospital Department of Orthopaedic Surgery at the completion of the rotation.

Medical Knowledge:

Objective:
1. Demonstrates understanding of the indications and contraindications for common elective orthopaedic surgery.
2. Practice base learning and improvement.
3. Actively acquires new knowledge through library and electronic resources and through participation in Journal Club reviews.
4. Read and understand the principles and concepts as outlined in the OKU general and OKU Subspecialty Series.

Process:
1. Read Hoppenfeld’s Surgical Exposures in Orthopaedics
2. Other reading assignments as directed by the faculty and senior residents.
3. Participate in Indications/Surgical Planning Conference.

Evaluation of Outcomes:
1. By faculty of the Department of Orthopaedic Surgery at completion of rotation.
2. Orthopaedic In Training Examination.

Interpersonal and Communication Skills:

Objective:
1. Residents must be able to demonstrate interpersonal and communication skills that assist in effective information exchange and be able to team with patients, patients’ families, and professional associates.
2. Elicit and provide information using effective listening, non-verbal, explanatory, questioning, and writing skills.
3. Maintain comprehensive, timely, and legible medical records.

Process:
1. Communicate patient information to assist in the transition of care to and from the orthopaedic on call teams.
2. Communicate patient information to faculty.
3. Document patient information in the form of history and physical examinations, progress notes, operative notes, discharge summaries, and other documentation as assigned.
4. Obtain patient histories in the ambulatory and inpatient setting.
5. Communicate findings and plans of care with patients and families.

Evaluation of Outcomes:
1. By faculty of the Thomas Memorial Hospital Department of Orthopaedic Surgery at completion of rotation.
2. By staff at the end of the rotation.
Professionalism:

Objective:
1. Maintain confidentiality of patient information.
2. Describe and understand the basic ethical concepts such as autonomy, beneficence, justice, and nonmalfeasance.
3. Demonstrate punctuality in completing assignments.
4. Maintain positive attitude and good work ethic.
5. Demonstrate respect, compassion, integrity, and responsiveness to the needs of patients.
6. Promptly respond to the needs of nursing and support staff.

Process:
1. One month rotation on the Thomas Memorial Orthopaedic Surgery service.

Evaluation of Outcomes:
1. By faculty of the Thomas Memorial Department of Orthopaedic Surgery at completion of rotation.
2. By staff at the end of the rotation.

Practice-Based Learning and Improvement:

Objective:
1. Identify areas for person and practice improvement and implement strategies to enhance knowledge, skills, attitudes, and process of care.
2. Use information technology to manage information, access online medical information, and support own education.
3. Facilitate the learning of students and other health care professionals.

Process:
1. Reading and accessing current medical literature electronically to gain information about specific patient conditions encountered on the care of tumor patients.
2. Actively participate in the education of medical students.
3. Present Grand rounds, M&M conferences, and teaching conferences as assigned.

Evaluation of Outcomes:
1. By faculty of the Thomas Memorial Department of Orthopaedic Surgery at completion of rotation.
2. By staff at the completion of rotation.

Systems-Based Practice:

Objective:
1. Demonstrate an awareness of and responsiveness to the larger context and system of health care, as well as the ability to call effectively on other resources in the system to provide optimal health care.
3. Practice cost-effective health care and resource allocation that does not compromise quality of care.
4. Coordinate long term care with social services, physical therapist, families, and other concerned parties.
5. Understand principles of patient safety in a hospitalized setting.
6. Understand universal precautions and how health care workers may decrease the risk of acquiring blood borne illness.
Process:
1. The resident must be able to justify the rationale for each laboratory or imaging study ordered during rotation.
2. The resident will participate in the documentation and coding of surgeries and notes.
3. The resident will help coordinate the care with ancillary services.

Evaluation of Outcome:
1. By faculty of the Thomas Memorial Department of Orthopaedic Surgery at completion of rotation.
| **OUTPATIENT** | Evaluates new patients, post-operative patients, and follow-up patients with operative and non-operative musculoskeletal problems. 

Presents each patient to the attending orthopaedic surgeon(s). This presentation will include history, examination, diagnosis and proposed treatment plan. 

Performs office procedures such as injections, cast applications, fracture reduction and fluoroscopic manipulation. 

The resident’s activities will be supervised closely by the attending orthopaedic surgeon. As the resident becomes more competent and independent, the degree of supervision will be reduced, but not completely eliminated. |
|---|---|
| **INPATIENT** | Participates in daily, morning and evening rounds. Appropriate bedside care will be initiated and carried out as appropriate. 

Writes daily progress notes and performs discharge summaries and rehabilitation plans as appropriate. 

The attending orthopaedic surgeon will act as an advisor and supervisor in all of these activities as appropriate. |
| **OPERATIVE** | Assists the attending orthopaedic surgeon in surgery and demonstrates familiarity with the anatomy and operative approaches for common orthopaedic surgeries. With progress, the resident will be able to perform surgical approaches under the direct supervision of the attending orthopaedic surgeon. In time, the PGY2 resident will perform an increasing percentage of the case under supervision of the attending orthopaedic surgeon as his/her skills progress. |
| **EMERGENCY** | Sees patients in the emergency department and presents these patients to the attending orthopaedic surgeon. An appropriate plan will be made and the patient treated either as an outpatient or admitted to the hospital as appropriate. 

In the event that the patient will require emergency surgery, the resident will perform the history and physical examination and prepare the patient for the operating room. He/she will then assist or be assisted by the attending surgeon in the execution of the emergency surgery as appropriate. |