

MARSHALL UNIVERSITY SCHOOL OF MEDICINE GASTROENTEROLOGY FELLOWSHIP TRAINING PROGRAM

LETTER OF AGREEMENT FOR THE COOPERATIVE TRAINING OF RESIDENTS/FELLOWS FROM MARSHALL UNIVERSITY JOAN C. EDWARDS SCHOOL OF MEDICINE (MUSOM), AND VETERANS ADMINISTRATION MEDICAL CENTER (VAMC)

This letter of agreement is an educational statement that sets forth the relationship between Marshall University School of Medicine (MUSOM) and Veterans Administration Medical Center (VAMC). This statement of educational purpose is not intended to supercede or change any current contracts and institutional affiliation agreements between the institutions.

This Program Letter of Agreement is effective from July 1, 2022, and will remain in effect for ten (10) years, unless updated, changed, or terminated as set forth herein. All such changes, unless otherwise indicated must be approved in writing by all parties.

Persons Responsible for Education and Supervision

At MUSOM: Wesam Frandah, M.D., Program Director

At VAMC: Saif Bella, M.D., Site Director and
All current MUSOM/VAMC Faculty Members which may change due to
resignation or the addition of new faculty members

1. Responsibilities

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

2. Content and Duration of the Educational Experiences

The content of the educational experiences has been developed according to AOA/ACGME Residency/Fellowship Program Requirements and are delineated in the attached goals and objectives for each rotation. See Exhibit B.

The Program Director, Dr. Wesam Frandah is ultimately responsible for the content and conduct of the educational activities at all sites, including VAMC. The MUSOM Program Director/VAMC 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. The Program Coordinator, is responsible for oversight of some Resident/Fellow activities, including coordination of evaluations, arrangement of conferences, sick leave and annual leave as mandated by MUSOM.

3. Assignments

In accordance with the Affiliation Agreement between MUSOM and VAMC, MUSOM will provide to VAMC, the name of the Resident(s)/Fellow(s) assigned to the site, the service they will be training on and other relevant information.

4. Responsibility for supervision and evaluation of fellows

Resident/Fellows 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/Fellow 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 Gastroenterology Fellowship Program. Fellows will be given the opportunity to evaluate the teaching faculty, clinical rotation and VAMC at the conclusion of the assignment.

5. Policies and Procedures for Education

During assignments at VAMC, Residents/Fellows will be under the general direction of MUSOM's Graduate Medical Education Committee's and the Gastroenterology Program's Policy and Procedure Manual as well as the policies and procedures of VAMC, including but not limited to, policies related to patient confidentiality, patient safety, medical records.

6. Authorized Signatures

Veterans Administration Medical Center




Saif Bella, MD, Site Director

10/20/2022
Date



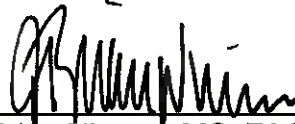
Na Su, MD
Chief of Staff

10/20/2022
Date



W. Michael Skeens, MD
Chief of Medicine


10-20-2022
Date



J. Brian Nimmo, MS, FACHE
Medical Center Director

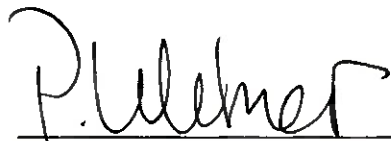
10/24/22
Date

MUSOM




Wesam Frandah, MD
Program Director - MUSOM

9/30/2022
Date




Paulette S. Wehner, MD, DIO
Vice Dean for GME

9/30/22
Date



Bobby Miller, MD
Interim Dean

10/4/22
Date



DEO

12/9/22

Exhibit A: List of Faculty Members

At MUSOM: Wesam Frandah, MD, Program Director

At VAMC: Saif Bella, MD, Site Director

Exhibit B: Goals and Objectives

Gastroenterology Inpatient Rotation Veterans Affairs Medical Center GOALS AND OBJECTIVES

The goals for this rotation are to understand principles of indication and non-indication of GI endoscopy procedures; principles of informed consent; principles of conscious sedation, and sedation monitoring; to demonstrate technical skills of diagnostic and therapeutic endoscopy; and to properly interpret endoscopic findings in the context of patient illness. This fellow is also in charge of seeing the new GI inpatient consults at the VA hospital. The method is performance of endoscopic procedures at VAMC under the direct supervision of the endoscopy attending of the day. Also evaluating inpatient consults at the VA hospital, with appropriate supervision from the GI attending (including daily working/teaching rounds lasting at least 1 hour daily).

At the VA, fellows who have demonstrated documented mastery of specific endoscopic procedures may perform these with a supervising attending available to be called if needed; The VA fellow is also in charge of reviewing all the pathology reports of the month produced at the VA endoscopy suite and take appropriate action. The goals and objectives for each PGY level are expected to be accomplished after participating in one or more non-consecutive one block rotations thorough the year.

First Year Fellow:

Patient Care

Goals: Fellows must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Fellows are expected to:

- Learn the practice of health promotion, disease prevention, diagnosis, care and treatment of men and women from adolescence to old age, during health and all stages of illness.
 - Identify the indications and contraindications for GI endoscopic procedures.
 - Perform diagnostic GI endoscopy with assistance of GI Faculty.
 - Develop a plan of care for all VA inpatient consults under the supervision of GI faculty.
 - Recognize principles of inpatient consultative gastroenterology including diagnosis, differential diagnosis, pathophysiology, and management.
- Demonstrate competence in the evaluation and management of the following disorders: Diseases of the esophagus, gastrointestinal neoplastic disease.
 - Identify normal and abnormal findings during GI endoscopy.
 - Recognize common pathologies of the esophagus including neoplastic lesions.
 - Outline the appropriate intervals for screening and surveillance endoscopy (i.e., colon cancer, Barrett's esophagus, etc.).

- Technical and other skills for the entire PGY4 year:
 - Perform a minimum of 50 supervised esophagogastroduodenoscopies.
 - Perform a minimum of 5 esophageal dilations.
 - Perform a minimum of 50 colonoscopies.
 - Demonstrate knowledge to perform biopsies of the mucosa of esophagus, stomach, small bowel, and colon.

Medical Knowledge

Goal: Fellows must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care.

- Correlate with clinical training prudent, cost-effective, and judicious use of special instruments, tests, and therapy in the diagnosis and management of gastroenterological disorders.
 - Discuss the basic endoscopic techniques for upper and lower endoscopy based on individual reading or reviewing the DVDs collection available.
 - Recognize importance of cost-effective utilization of endoscopic therapies/instruments.
- Correlate with clinical training sedation and sedative pharmacology.
 - Describe the basic concepts of conscious sedation.
 - Outline the principles of sedation monitoring.
- Demonstrate appropriate utilization of laboratory tests and procedures.
 - Outline adequate responses to the inpatient consults and schedule appropriate procedures based on sound medical knowledge, under the supervision of GI Faculty.

Practice Based Learning and Improvement

Goal: Fellows must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning

- Identify strengths, deficiencies and limits in one's knowledge and expertise.
- Displays intellectual curiosity and receptivity to supervision in inpatient care settings.

Systems Based Practice

Goal: Fellows must 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.

- Coordinate patient care within the health care system relevant to their clinical specialty.
- Clearly delineates patient follow-up plan at time of disposition.

Professionalism

Goal: Fellows must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles.

- Responsiveness to patient needs that supersedes self-interest.
- Demonstrates a willingness to understand and support the patient's emotional state.

Interpersonal and Communication Skills

Goal: Fellows must demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.

- Communicate effectively with patients, families, and the public, as appropriate, across a broad range of socioeconomic and cultural backgrounds.
- Provides adequate time for the patient to consider information provided and confirm that essential information is understood by the patient.

Second Year Fellow

Patient Care

Goal: Fellows must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Fellows are expected to:

- Learn the practice of health promotion, disease prevention, diagnosis, care and treatment of men and women from adolescence to old age, during health and all stages of illness.
 - Analyze the indications and contraindications for GI endoscopic procedures.
 - Perform diagnostic and therapeutic GI endoscopy with the assistance of GI Faculty.
 - Develop a plan of care for all VA consults under the supervision of GI faculty.
- Demonstrate competence in the evaluation and management of the following disorders: Diseases of the esophagus, gastrointestinal neoplastic disease.
 - Categorize normal and abnormal findings during GI endoscopy.
 - Differentiate and describe common pathologies of the esophagus including neoplastic lesions.
 - Analyze and apply the appropriate intervals for screening and surveillance endoscopy (i.e., colon cancer, Barrett's esophagus, etc.).
- Technical and other skills for the entire PGY5 year:
 - Perform a minimum of 100 supervised esophagogastroduodenoscopies.
 - Perform a minimum of 10 esophageal dilations.
 - Perform a minimum of 100 colonoscopies, with 15 supervised polypectomies
 - Perform a minimum of 10 PEG.
 - Perform 15 non-variceal hemostasis (5 active bleeders).
 - Perform 10 variceal hemostasis (3 active bleeders)
 - Perform biopsies of the mucosa of esophagus, stomach, small bowel, and colon.

Medical Knowledge

Goal: Fellows must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care.

- Correlate with clinical training prudent, cost-effective, and judicious use of special instruments, tests, and therapy in the diagnosis and management of gastroenterological disorders.
 - Demonstrate advanced endoscopic techniques for upper and lower endoscopy based on individual reading and by reviewing the instructional DVD collection available.
 - Practice cost-effective utilization of endoscopic therapies/instruments.
- Correlate with clinical training sedation and sedative pharmacology.
 - Outline advanced concepts of conscious sedation.
 - Explain and demonstrate the theory of sedation monitoring.
- Demonstrate appropriate utilization of laboratory tests and procedures.
 - Justify responses to the consults and perform appropriate procedures based on sound medical knowledge, under the supervision of GI Faculty.

Practice Based Learning and Improvement

Goal: Fellows must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning

- Incorporate formative evaluation feedback into daily practice.
- Seeks input on how to improve procedural techniques and diagnostic skills.

Systems Based Practice

Goal: Fellows must 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.

- Advocate for quality patient care and optimal patient care systems.
- Communicates and supports patient and family decision-making about discharge planning – including settings of care and service options.

Professionalism

Goal: Fellows must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles.

- Sensitivity and responsiveness to a diverse patient population, including but not limited to diversity in gender, age, culture, race, religion, disabilities, and sexual orientation.
- Provides information to patients capable of receiving it in a form they can readily understand.

Interpersonal and Communication Skills

Goal: Fellows must demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.

- Work effectively as a member or leader of a health care team or other professional group.
- Accepts feedback from team member.

Third Year Fellow

Patient Care

Goal: Fellows must be able to provide patient care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health. Fellows are expected to:

- Learn the practice of health promotion, disease prevention, diagnosis, care and treatment of men and women from adolescence to old age, during health and all stages of illness.
 - Criticize or defend indications and contraindications for GI endoscopic procedures.
 - Perform diagnostic and advanced therapeutic GI endoscopy with supervision of GI Faculty.
 - Manage the consult service under supervision of GI Faculty.
- Demonstrate competence in the evaluation and management of the following disorders: Diseases of the esophagus, gastrointestinal neoplastic disease.
 - Interpret normal and abnormal findings during GI endoscopy and generate a plan of care.
 - Treat a wide range of pathologies of the esophagus including neoplastic lesions
 - Practice the appropriate intervals for screening and surveillance endoscopy (i.e. colon cancer, Barrett's esophagus, etc.).
- Technical and other skills for the entire PGY6 year:
 - Perform a minimum of 130 supervised esophagogastroduodenoscopies.
 - Perform a minimum of 20 esophageal dilations.
 - Perform a minimum of 30 flexible sigmoidoscopies.
 - Perform a minimum of 140 colonoscopies, with 30 supervised polypectomies.
 - Perform a minimum of 15 PEG.
 - Perform 25 non-variceal hemostasis (10 active bleeders).
 - Perform 20 variceal hemostasis (5 active bleeders)
 - Demonstrate knowledge to perform biopsies of the mucosa of esophagus, stomach, small bowel, and colon.

Medical Knowledge

Goal: Fellows must demonstrate knowledge of established and evolving biomedical, clinical, epidemiological and social-behavioral sciences, as well as the application of this knowledge to patient care.

- Correlate with clinical training prudent, cost-effective, and judicious use of special instruments, tests, and therapy in the diagnosis and management of gastroenterological disorders
 - Perform independently advanced endoscopic techniques for upper and lower endoscopy based on individual practice and by reviewing the instructional DVD collection available.
 - Practice cost-effective utilization of endoscopic therapies/instruments.
- Correlate with clinical training sedation and sedative pharmacology.
 - Safe practice of conscious sedation including monitoring.
- Demonstrate appropriate utilization of laboratory tests and procedures.
 - Manage the VA GI consults and schedule appropriate procedures based on sound medical knowledge, under the supervision of GI Faculty.

Practice Based Learning and Improvement

Goal: Fellows must demonstrate the ability to investigate and evaluate their care of patients, to appraise and assimilate scientific evidence, and to continuously improve patient care based on constant self-evaluation and lifelong learning

- Identify and perform appropriate learning activities.
- Participates regularly in learning activities that maintain and advance individual competence and performance.

Systems Based Practice

Goal: Fellows must 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.

- Work in interprofessional teams to enhance patient safety and improve patient care quality.
- Collaborates with other healthcare providers and understands their various roles in providing quality care.

Professionalism

Goal: Fellows must demonstrate a commitment to carrying out professional responsibilities and an adherence to ethical principles.

- Respect for patient privacy and autonomy.
- Explains risk/benefit of medical intervention when obtaining informed consent.
- Accountability to patients, society and the profession.
- Complies with all infection control policies for hand washing and patient isolation procedures.

Interpersonal and Communication Skills

Goal: Fellows must demonstrate interpersonal and communication skills that result in the effective exchange of information and collaboration with patients, their families, and health professionals.

- Act in a consultative role to other physicians and health professionals
- Respects the skills and contributions of other healthcare providers.

Patient Population

The patients include outpatients and inpatients scheduled for procedures each day as well as all the new inpatient consults of the day.

Teaching Methods

- Direct patient care.
- Teaching rounds.
- Noon Conference
- Endoscopy Clinic.
- Assigned readings.
- Ethics conference.

Assessment Method (Fellows)

- Attending monthly written evaluation of the fellow.
- Attending observation of procedures.
- Case presentation.
- Oral examination.
- Review of Procedure log.

Assessment Method (Faculty)

- Direct feedback to Faculty member.
- Bi-annual written faculty and program evaluations.

Level of Supervision

The GI consult attending of the month staffs all consults and makes daily teaching/work rounds with the fellows. All procedures are also supervised by the VA endoscopy attending.

Duty Hours

The duty hours are 8-5 daily. Workloads consist of all endoscopic procedures, scheduled at a rate of approximately 1-2 per hour depending on case complexity, and review of all the available pathology reports to keep the records up-to-date.

Lines of Responsibility

The lines of responsibility on this rotation are as follows, regardless of level of training:

Fellow → Attending

Educational Resources

All fellows are encouraged to become members of the main GI societies (AGA, ASGE, and ACG). This provides a wealth of information available on their websites. All fellows have access to computers and internet, which allows them to perform literature searches in the various medical engines (Medline, PubMed, Cochrane, etc.). In addition, there are textbooks and other resources provided by the attending physician. Clinical materials from these patients, including x-rays and pathological materials, are frequently included in didactic conferences. The VA library is also available for educational material consultation.