

# LOMA LINDA UNIVERSITY MEDICAL CENTER HOUSE STAFF MANUAL 2009-2010

This House Staff Manual has been prepared for all Residents and Fellows in Loma Linda University Medical Center (LLUMC) training programs. The term "Resident" is used to refer to both Residents and Fellows.

It is your responsibility to read this Manual and become familiar with the information that is included.

GMEC Policies are available from House Staff Office (HSO) or on the New Innovations Welcome Page.

LLUMC Policies are available on the VIP Page of LLUMC's Intranet at <http://home.mc.llumc.edu/>

Concerns, suggestions or questions, may be referred to the LLUMC House Staff Office (HSO) at (909) 558-8131 or Ext. 88131.

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# GENERAL INFORMATION

Loma Linda University Medical Center (LLUMC) is a not-for-profit, religious healthcare corporation which is accredited by the Joint Commission on Accreditation of Healthcare Organizations (JCAHO). The motto of LLUMC, "To Make Man Whole," summarizes its philosophy that work for the whole person -- spiritual, physical, mental and social -- is an essential part of the gospel of Jesus Christ. Thus, LLUMC's goal is the restoration of health on this earth and the reconciliation of man to God, which is the preparation for eternal life.

The education of Residents and Fellows (hereinafter referred to as Residents) is an integral part of the mission of LLUMC. It is important to remember that just as the hospital contributes immeasurably to the extension of the Resident's medical education, the Resident has much to contribute to the hospital's goal of excellence in patient care. We ask each Resident to remember that the degree of skill and kindness with which they treat patients and their families is certainly an excellent---if not the most important---measure of their competence. We expect that the relationships of Residents with other physicians and with employees of all departments of LLUMC will be based on mutual respect and on the realization that all are trying to do their best for the patient.

## **THE SABBATH HOURS**

The Sabbath, or seventh day of the week, is a special day at all LLUMC entities. All personnel are encouraged to maintain an atmosphere of reverence and respect. Generally speaking, only those healthcare services that are necessary to maintain an orderly, clean, and safe environment for patients, staff and visitors and that promote healing and comfort to patients are to be provided from sundown Friday to sundown Saturday.

## **CHAPEL**

The LLUMC Chapel is located off the Lobby near the main entrance of LLUMC. Services consisting of a short talk and discussion are held Saturdays and Sundays at 10:30 AM.

## **MANUALS/POLICIES**

Manuals covering various aspects of LLUMC operation and patient care are available on the **VIP Page of LLUMC's Intranet** at <http://home.mc.llumc.edu/> These should be consulted for additional detail or guidance in special situations. Refer to LLUMC's Policies & Procedures for additional information concerning LLUMC policies. Some services have established protocols for special procedures. Inquiry about such protocols should be made as you start each service.

## **PATIENTS' RIGHTS**

Patients have a fundamental right to considerate care that safeguards their personal dignity and respects their cultural, psychosocial and spiritual values. Understanding and respecting these values guide the provider in meeting the patients' care needs and preferences. All patients must be treated with dignity, respect, and understanding, even when they themselves are acting in an unacceptable manner. Please refer to the V.I.P. page at <http://home.mc.llumc.edu/> for additional LLUMC information concerning patients' rights.

Further information regarding patients' rights may be obtained by reviewing Title 22 California Administrative Code, Section 70707, or by contacting Patient Relations, Ext. 44647 at LLUMC and Ext. 66611 at the East Campus Specialty Hospital.

## **STAFF RIGHTS**

LLUMC strives to meet the physical, social, psychological and spiritual needs of all its patients. It also recognizes the rights of its Residents to request not to participate in an aspect of patient care, including treatment, where there is a perceived conflict with the Resident's cultural values, ethics or religious beliefs.

## **EQUAL OPPORTUNITY**

LLUMC is committed to equal opportunity for qualified men and women. It does not discriminate unlawfully against qualified persons based on race, color, national origin, ancestry, disability (mental and physical), medical condition, marital status, sex, age (40 or over), special qualified disabled Veterans, and Vietnam Era Veterans in terms and conditions of employment. Refer to LLUMC Policy I-68, "Equal Employment Opportunity" for details.

All personnel are expected to honor this commitment to equal employment opportunity and treatment. Information, help, or counsel on such matters may be obtained through the Human Resource Management Department.

## **CONFIDENTIALITY**

Only individuals who need to know health care information from a patient should have access to the information. Conversations about patients should be avoided in all public areas, including elevators, Cafeterias, etc. Furthermore, staff that have computer access privileges shall abide by all LLUMC policies on the use and confidentiality of system data. It is your responsibility to protect our patient's fundamental right to privacy. Two important laws that protect the privacy of a patient's medical information received or created by the Medical Center are the Confidentiality of Medical Information Act (CMIA) and the Health Insurance Portability and Accountability Act (HIPAA). Both the CMIA (California law) and HIPAA (federal law) preserve the patient's fundamental right to privacy by establishing standards of privacy by which all employees of the Medical Center must abide. Failure to abide by Medical Center policies that pertain to the protection of patient privacy under CMIA and HIPAA may result in disciplinary action, up to and including, termination.

Each employee is responsible for attending HIPAA training and other privacy/confidentiality training that may be required. Furthermore, all employees must apply common sense principles for the protection or safeguarding of patient information to all daily activities. This means that prior to accessing or discussing a patient's medical information, you should ask yourself the following questions:

1. Do I have a business need to access or discuss this information?
2. What is the minimum amount of information that I need to access or discuss to meet the business need?

It is important to remember that although you may have access to systems containing medical information or access to hardcopy medical information, this information is only to be used for business purposes following appropriate LLUMC policy. Additionally, if you should become a patient at LLUMC, you will need to follow the appropriate process to access your own medical record. You may **NOT** access your personal medical record information or that of a family member or friend by logging onto your computer and looking up the information. Doing so may result in corrective action including termination from the training program.

Questions concerning specific release of information issues may be referred to Health Information Management (Ext. 38309 OR 38300).

## **NEWS MEDIA**

**Under no circumstance** are Residents to divulge information in regard to patients, hospital policies or events to news media. The Medical Center has a system to provide information to the public and news media about the condition of patients, developments, internal operations or Medical Center involvement in disasters. Refer to LLUMC Policy D-5 "Uses and Disclosures of Protected Health Information" for more information. If contacted by the Media for any reason concerning your residency, please speak to Community Relations (extension 44419) prior to commenting.

## **LEGAL COUNSEL, OFFICE OF (Ext. 22644)**

Potential problems regarding malpractice litigation or other patient related or staff related legal issues must be referred to the Office of Legal Counsel immediately. The Office of Legal Counsel accepts all subpoenas. Other legal issues such as depositions, etc. should be brought to the attention of the Office of Legal Counsel.

## **CONDUCT AND APPEARANCE**

Residents are expected to conduct themselves in a dignified, courteous and professional manner and are expected to present a neat, well-groomed appearance in compliance with LLUMC's Dress & Appearance Policy, a copy of which was mailed with the Acceptance Form at the time of initial appointment.

Resident uniform consists of appropriate professional clothing, white coat, I.D. Badge and nametag. "Scrubs" that are provided in-house are hospital property and are NOT to be worn outside the LLUMC area or taken home. Residents are expected to adhere to LLUMC policies concerning conduct and appearance.

Employees, including Residents, involved in the continuum of patient care shall be prohibited from the use of artificial/acrylic nails, overlays, tips, nail wraps, applications of glue or any other substance that may infringe upon the natural integrity of the natural nails.

Rings other than plain bands shall be discouraged for health care employees. Please refer to LLUMC Policy I-83 Hand Hygiene Procedures on LLUMC's VIP Page on the Intranet for full details of this policy.

## **IDENTIFICATION**

Residents on duty at LLUMC are required to wear the LLUMC name tag and official photo I.D. Badge with the photo and name visible at all times, except when working in areas where cover gowns are required. The I.D. Badge must not be defaced, i.e., no stickers, etc. The I.D. Badge is the property of LLUMC, is not to be loaned to anyone, and must be returned to HSO upon termination from the training program.

In addition to being used for identification, the I.D. Badge is used to open gates in closed parking areas, gain access to LLUMC through controlled-access doors, the Resident Lounge, scrub vending machines (with bar code added), for night time entrance, and to identify staff eligible to receive discounts. The I.D. Badge must be presented upon request to any LLUMC Security Officer.

I.D. Badge pictures are taken by Human Resource Management Department during the following hours: Monday-Thursday from 8 AM to 4 PM, and Friday from 8AM to 12 PM. ID Badges will be issued by HSO when all requirements, including attendance at Orientation activities, have been completed.

## **FIRE EMERGENCY PRE-PLAN:**

1. Know the location of the nearest fire alarm
2. Know the emergency number to dial – **911**
3. Know the location of the fire extinguishers and how to use them
4. 4. Know evacuation route and relocation points

## **FIRE PLAN**

In case of fire, personnel are to know and follow the procedures outlined below, which can be summarized using the acronym **RACE**:

### ➤ **Rescue**

- **Remove** persons from immediate danger
- **Close** doors to affected area

### ➤ **Alarm**

- **Activate** fire alarm pull station nearest fire
- Dial **911** and give:
  - Exact location of fire (e.g. building, floor, room number)
  - Nature and extent of fire
- **Post** someone in main corridor to direct emergency responders to the fire

### ➤ **Contain**

- Close doors and windows

### ➤ **Extinguish/Evacuate**

- **Extinguish**
  - Use proper extinguisher (ABC for all types of fire, water for ordinary combustibles, or CO<sub>2</sub>/Halon for electrical and flammable liquids.
- **Evacuate** (If defending in place is not feasible, initiate evacuation)
  - Horizontal: To primary or secondary relocation point
  - Vertical: To your assigned relocation point
  - External: Patients to triage area, others to relocation points

## **USE OF FIRE EXTINGUISHERS:**

**PULL the pin** – Break the plastic tie by pulling or twisting the pin

**AIM at the base of the fire** – Hold the extinguisher firmly and upright

**SQUEEZE the handle** – This activates the extinguisher

**SWEEP from side to side** – Start at the near edge of the fire and work toward the far edge

## **DISASTER PLAN**

The Emergency Disaster Plan (Plan) is a fundamental component of the emergency preparedness at LLUMC. Its purpose is to ensure continuation of service during and after disaster events. It provides direction for preparedness, response and recovery relating to events which could disrupt the environment of care, including earthquakes, severe storms external multi-casualty incidents, fires, loss of utilities, building collapse, internal emergencies, civil disturbances.

This Plan provides for all LLUMC areas, including LLU Children's Hospital, East Campus Hospital, LLU Heart & Surgical Hospital, Faculty Medical Offices, Behavioral Medical Center and Mt. View Plaza. Plan activation will involve some or all personnel. On-duty personnel are to remain at their workstations unless preassigned or requested to report elsewhere by an

appropriate administrator. Personnel are to remain on duty until officially relieved. Since telephone lines must be kept open for emergency use by the department head or designees, personnel are prohibited from using switchboard lines to place calls to or from the Medical Center.

In a multi-casualty situation, off-duty personnel are to wait for a call from their supervisor and should be where the supervisor can contact them. Home phones should be kept clear. If not called prior to the start of a regularly scheduled shift, personnel must report for duty at their regularly scheduled time. Refer to the Emergency Disaster Plan on the LLUMC VIP website for further details.

### **SAFETY MANAGEMENT PROGRAM**

The Safety Management Program is designed to maintain a safe environment of care for Residents, employees, patients and visitors. The responsibility and authority for the Safety Management Program has been delegated to the following safety offices:

- Life Safety & Loss Control Officer
- Environmental Health & Safety Officer
- Radiation Safety Officer

The Safety Management Program functions by LLUMC department safety policies and also responds to appropriate regulatory agency safety standards. Safety committees have been established at the various corporate entities to help guide the program. In addition, Safety Coordinators are chosen from various departments to give assistance in communicating safety information to/from staff. The Office of Environmental Health & Safety provides assistance in orientation, in-service training, safety inspections, accident/incident investigation, fire drills, registration of radiation-producing machines, licensing of radioactive material use, radiation/hazardous agents training, chemical spill response, and testing of airborne contaminants, in addition to other aspects of the Injury and Illness Prevention Program.

Residents and employees are individually responsible for compliance with requirements of the Safety Management Program. This includes, but is not limited to, participating in required safety training, performing one's duties safely, following proper blood borne pathogen and tuberculosis precautions, observing hazardous material and radiation safety precautions, wearing personal protective equipment (PPE), as appropriate, and using good ergonomics in performing duties.

Questions regarding the Safety Management Program should be directed to the Office of Environmental Health & Safety, Ext. 44917 or 44999, and the Office of Radiation Safety, Ext. 44913.

### **CODE BLUE Medical Emergency (Pediatric – call; 55555 Adult -- call 77777) Refer to Policy M-35 CODE BLUE (CPR) MANAGEMENT**

The CODE BLUE TEAM functions to provide cardiovascular and respiratory support for the arrested patient. This may include intubation and ventilatory support, cardiac compression, cardiac drugs and fluid therapy. "CODE BLUE" is initiated when a patient has a cardiac and/or respiratory arrest. The CODE BLUE TEAM includes Cardiology Residents (first year and senior year(s)), Anesthesiology Resident and Surgery/Internal Medicine Resident who are responsible for adult patients; PICU Residents who are responsible for pediatric patients, as well as nursing and respiratory care personnel. CODE BLUE TEAM members must maintain current certification in Basic Cardiac Life Support, Advanced Cardiac Life Support, Pediatric Advanced Life Support, and/or Neonatal Resuscitation Provider, as required. CODE BLUE TEAM notification is accomplished via special paging system, giving location of emergency.

Direction of CODE BLUE is under the supervision of the Senior Medical or Pediatric Resident who is present. At East Campus Specialty Hospital, or one of the affiliated hospitals, similar teams are designated.

Rapid Response Teams are also available for those circumstances where urgent assistance is needed to avoid a code. Nurses or physicians can call for a Rapid Response Team at all inpatient locations.

### **CODE PINK (<12 months) Infant Abduction (call 911)**

Alerts staff that an infant less than 12 months of age is suspected or confirmed as missing. All employees should be alert and on the look out for unusual behavior such as anyone leaving with a large bag, gym bag, duffel bag or an infant. Be observant and report any suspicious activity to Security at "911". Do not approach suspects.

### **CODE PURPLE (>12 months) Child Abduction (call 911)**

Alerts staff that a child greater than 12 months of age is suspected or confirmed as missing. All employees should be alert and on the look out for unusual behavior. Be observant and report any suspicious activity to Security at "911". Do not approach suspects.

### **SECURITY (Ext. 44320)**

The Department of Security, located at 24690 University Avenue on the corner of University and Campus, attempts to provide a safe environment for everyone at LLUMC. Security Officers are specifically trained in hospital safety, fire prevention and law enforcement. Security Officers are on duty 24/7. Notify the Department of Security immediately in case of suspicious circumstances, theft, or loss of personal property. Other aspects of the security program include training programs and security surveys. Requests made or directions given by Security Officers are to be responded to as requested.

- To reach the Security Control Center during an **EMERGENCY, DIAL 911**.
- To report a security concern, theft or security incident, call Ext. 44320. An Officer will be dispatched and the appropriate actions taken.
- Escort service to and from each parking lot is available to Residents working the evening or night shift. For escort service, please call Ext. 44320.
- Residents and staff are required to immediately report all persons who act suspicious and/or who are in restricted areas (Ext. 44320). Please remember that staff and employees are required to wear identification badges according to policy.

### **PARKING--LLUMC**

A current white Permit with a red oval showing the letter Permit "R" PARKING DECAL is required for Residents. Parking is available in the physician portion (lowest level) of Lot "G", accessed on Campus Street. Access to parking gates is by use of the I.D. Badge. Between 4 PM and 7 AM and on weekends or holidays, residents may also park in Lot G-East next to the Coleman Pavilion. Additional parking is available in Lot X and Lot "U" on the corner of Campus and Stewart Streets. Parking permits are issued at Orientation or may be obtained from the Security Office, located at 24690 University Avenue, during normal business hours. The I.D. Badge must be shown to obtain a parking permit other than at Orientation. A copy of the LLUMC/LLU Parking Rules and Regulations is issued with each permit.

Parking in crosswalks, red zones or restricted areas is prohibited and a violation of Medical Center policy. In addition, parking is **NOT PERMITTED** in lots reserved for patients and visitors, the Emergency Room (Lot "C" patient parking area, the Service Lot (Lot "D")). Violations of parking regulations will be cited by the LLUMC Department of Security and

vehicles will be towed away at your expense when a vehicle is parked improperly.

### **PARKING--FACULTY MEDICAL OFFICE (FMO)**

Parking is available in Lot "J" east of the FMO for Residents who are on duty at the FMO. Parking is **NOT PERMITTED** in the north or west patient parking lot; however, Residents working at the FMO in the evening are authorized to park on the south side and back of the FMO after 4:00 PM in the marked "Physician" parking spaces only.

### **PARKING--LLUMC EAST CAMPUS SPECIALTY HOSPITAL (ECSH)**

Residents may park in clearly marked "employee" parking spaces.

### **PARKING—BEHAVIORAL MEDICAL CENTER (BMC)**

Residents may park in any space that is not designated by special marking

### **PARKING—HEART AND SURGICAL HOSPITAL**

Residents may park in any space not designated by special marking.

### **FOOD SERVICE**

The Nutritional Services Department operates cafeterias in Medical Center facilities providing an exclusively vegetarian menu. Menu offerings can be checked each day on the Menu Hotline - LLUMC (Ext. 45614); Childrens Hospital Cafeteria (Ext. 81300), or the monthly posting outside the cafeteria.

Cafeteria locations Include:

- Medical Center Cafeteria and Snack Shop
- Childrens Hospital Cafeteria
- LLUMC East Campus
- Faculty Medical Offices – Carrie's Café

University Foodservice Operated Cafeteria locations include:

- Faculty Dining Room in Coleman Pavilion
- Campus Cafeteria
- Patio Pantry

### **Cafeteria Payroll Deduction Purchase Program**

Employees have the option of signing up for cafeteria purchases by payroll deduction instead of paying with cash. This means your cafeteria purchases can be deducted directly from your biweekly paycheck. Benefits of the automatic payroll deduction program include, receive employee discount on all purchases made in cafeterias; quick, easy transactions at point of purchase; decrease waiting in check-out lines (specific "payroll deduction-express check-out lane"; no need to carry a purse, wallet, or cash; track account activity on each receipt and online; campus-wide coordinator to answer questions and provide assistance. Application forms for enrollment in the payroll deduction plan are available from Cafeteria Cashiers. Contact Jolene Ayers in Nutritional Services at Ext. 43362 for any questions.

### **LIBRARY (Ext. 44620)**

The Jesse Medical Library provides K.I.M., the Knowledge-based Information Menu, which extends the resources of the Library to the desktop. Highlights on K.I.M. are: PubMed/Medline, Micromedex (drug information including the PDR); MD Consult, full text journal access through Science Direct and Ebscohost, and the Cochran Collection of Evidence Based Medicine. K.I.M. also includes a section of selected links to useful Internet sites (medical and non-medical) and links to LLUMC internal programs and documents. The Online Card Catalog contains the holdings of the Jesse Medical Library, the Del E. Webb

Memorial Library, and several other libraries on campus with links to a rapidly growing collection of electronic resources. The catalog is also the gateway to accessing many of the electronic resources from home.

The physical Library houses nearly 400 print journals, over 5000 books, Audio Digest subscriptions in 10 disciplines as well as board review tapes, videos, and books. Seven computer stations are available for database searching and Internet surfing. A featured service of the Jesse Library is the delivery of journal Tables of Contents via email. Other services include literature searches and on-demand training in searching any of the databases. Access to the Library is 24/7 by contacting Security after hours (15 minutes limit). The Library's greatest resource is its professional staff who are eager to help you satisfy your information needs. The Library is located on Level 1 (Room 11105) of the Coleman Pavilion.

The **Del E. Webb Memorial Library** (Loma Linda University), located near the corner of Anderson and University Streets, provides materials to support the educational and cultural objectives of the University. The I.D. Badge is used as the library card. Call Ext. 44588 for additional information.

### **TELEPHONE DIALING INFORMATION**

- **LOCAL CALLS:** From an authorized phone, office, or nurses station, dial "9" to reach an outside line. House phones in lounges, hallways, sleeping rooms, cafeterias, etc. are often restricted from dialing outside.
- **LONG DISTANCE CALLS** for patient care related calls ONLY may be made by use of a long distance authorization code, available by request to HSO Ext. 88131.
- Operators do not have access to 411 or outside Operators.
- When requesting to contact another physician, operators will page twice, before calling home number.
- The Access Center can facilitate contacting outside physicians by calling Ext. 80000
- All home phone numbers are strictly confidential, and are never given out!
- Changes in home phone numbers should be given to both HSO and Operator Services.
- When requesting another Physicians pager number, operators will ask for your name and pager number for verification.
- Wake up service is NOT provided by Operator Services.
- Operator Services should be called for on-call changes for same-day and next-day ONLY. Changes must **NOT** be left on voice mail.

### **PAGING**

FROM INSIDE LLUMC:                    1717 + Pager Number + Your Extension + #  
FROM OUTSIDE LLUMC:                558-1717 + Pager Number + Your Phone Number  
FROM ANY EMAIL:                    [pager vanity name]@my2way.com  
FROM ANOTHER USAMobility 2-WAY PAGER: [pager vanity name]

### **PAGERS**

Residents are issued a 2-way pager and a Vanity Name, by HSO staff at the close of Orientation during "Housekeeping" or by Communication Network Services (B-Level) at other times. If your vanity name changes for any reason, it is imperative that you notify HSO (ext. 88131) and your residency program Coordinator. The pager comes with an instruction booklet – it is highly recommended that the Resident become acquainted with the various capabilities of the pager.

**ON CALL RESIDENTS will be contacted by assigned pager ONLY.** Operators do not hold pages, call cell phones or alternate phone numbers, etc. It is your responsibility to ensure that you are available by pager.

Resident must sign for the pager and is responsible for it until it is returned to HSO at the conclusion of the training program. The pager must be carried at all times while on duty and is not to be transferred from one Resident to another. Batteries are available from HSO or Communication Network Services, and pager repair is done by Communication Network Services located on B-level.

If the pager is lost or stolen, notify HSO (Ext. 88131) promptly. There is a \$50.00 charge for replacement of a lost pager; however, there is no charge for replacement of a stolen pager if a copy of a Police/Security report is provided to HSO.

Alpha messages may be sent via the VIP Page on the Intranet: click on Pager Directory, enter the name or number of the person to be paged, type in a brief message. Patient information may be sent via 2-way pager, but it should be minimized; pages should be deleted frequently from your pager.

The primary mode of reaching physicians by the hospital operators is by pager. Physicians are encouraged to use the paging system, as this is the quickest way to reach them and expedite their response to patient's needs. When a physician is paged, the following plan will be used; this policy only applies if hospital operators are asked to contact a physician:

### **Operators DO NOT TAKE MESSAGES FOR RESIDENTS**

- Operators will page Residents for callers (personal calls, family members, etc.).
- Operators are not authorized to screen your calls!
- Operators page TWICE. Encourage PATIENTS to stay on the line for TWO attempts. This will give approximately 7 minutes to answer the page. NOTE: When paging system is extremely busy, pages may be delayed giving slightly less time to answer.
- Operators "Park" the caller "holding" on a line. These "Park" lines have an extension number between 41040-41089 - receiving an extension number on your pager between these numbers indicates an outside caller is waiting for your response. After 3 minutes, the call circles back to the Switchboard and the operator will page a second time.
- TO PICK UP A "PARK" CALL FROM OUTSIDE: Dial 558-4800 (in-house 44800) (the main hospital number 558-0800 will work as well), then "2" (the prompt button for: "If you know your party's extension"), then dial the Park #. This will connect you directly to the caller. Paging to park lines cuts down on switchboard traffic.
- If you are PAGED INCORRECTLY and are inside LLUMC, request the caller to "Hold", press the hook-switch quickly, dial "O" to reach the operator, explain the error, depress the switch-hook again, then hang up. If the caller is not long distance, they may prefer to call back to the hospital.
- NOTE: When you place calls directly to patients or callers from your home or a private number, your number is made available through Caller ID unless you have it blocked through your local telephone service.

## **Operators will enter the following information on alpha pagers:**

Park line number 410---

Name of person calling

Return phone number (in case caller hangs up)

Who the caller represents: patient (pt), name of company, etc.

**Example:** 41084 mother of pt Betty smith 824-0800

## **OVERHEAD PAGES**

Overhead pages preceded by the word "URGENT" indicate that it is imperative that the person being paged is reached as quickly as possible. Please respond AT ONCE.

## **EMAIL**

It is the policy of LLUMC's HSO that the LLUMC assigned email account (llu.edu) is the **REQUIRED email account for all Residents and Fellows in training at LLUMC to use.**

- Official memos, etc. from HSO and the individual residency training programs will be sent to this email address.
- Residents/Fellows should review their email account at least once each week.
- Failure to check the LLUMC email account will NOT excuse a Resident/Fellow from meeting stated deadlines, etc.

To access your LLUMC email from any computer follow these simple instructions: go to the website [mcmail.llumc.edu](mailto:mcmail.llumc.edu) (no www in front). It will prompt for username and password. Use your regular LLUMC email/Internet sign-on and your Medical Center email will come up.

All LLUMC staff are to use the computer "E-mail" and Internet system ONLY for official business. Abuse of the Internet system will subject a Resident or employee to disciplinary action. LLUMC reserves the right to enter, obtain access, or search any and/or all computer "E-mail" and Internet system files and usage. Please refer to LLUMC Policy A-40 "Electronic Communications" for additional information concerning the use of E-mail, voice mail, telephone, cellular phones and pager systems at LLUMC.

## **JURY DUTY**

Physicians are not exempt from serving jury service in California. When completing the "potential juror questionnaire" indicate that you are a Resident Physician in training at LLUMC so the court is aware of your status. If you are not excused from jury service, LLUMC continues compensation for up to 15 days per calendar year, provided court verification of jury service (pink slip available in the Jury Assembly Room) is submitted to HSO. If you need verification to the Court that you are a Resident at LLUMC, contact HSO - Ext. 88131.

## **VOTING TIME**

The State of California keeps voting polls open to enable registered voters to vote outside normal working hours. When it is impossible to vote in a statewide election before or after normal work hours because of scheduling problems, advance notice must be given to the supervisor in order to be granted up to a maximum of two hours off work without loss of pay. Proof that voting was done during time off will be required.

## **TIPS AND GIFTS**

It is the practice of staff of a Seventh-day Adventist health-care institution to provide outstanding service and a caring attitude toward patients without encouraging or expecting gifts or tips in return. Thus, tips or gifts offered should politely be declined.

## **LOST AND FOUND**

Lost, found or abandoned articles are kept in the Dispatch Room A801, Ext. 44350. If an item is misplaced, please check first with the Information Desk (Ext. 88188).

### **NON-SMOKING POLICY**

LLUMC policy prohibits smoking inside LLUMC and on all properties owned and/or operated by the Medical Center. Non-compliant staff are subject to progressive discipline. Refer to Policy A-16 "Smoking" on the VIP Page of LLUMC's Intranet for more information.

### **DRUG-FREE WORK SITE POLICY I-58**

LLUMC maintains policies and procedures in harmony with Federal and State law to provide a safe work environment that is free from alcohol and drugs. Policy I-58 "Drug-Free Work Site" is available on the VIP Page of LLUMC's Intranet for more information.

Unauthorized possession or consumption of controlled substances, illegal drugs, or intoxicating beverages on hospital premises by Residents is prohibited. Residents who report for work under the influence of alcohol or drugs, whose behavior indicates the use of intoxicants or drugs, or who use intoxicants or drugs while on duty, or have them in their possession will be subject to disciplinary action up to and including dismissal. A condition of continued training may include appropriate medical examinations and toxicologic examination of body fluids. In the interest of safety, Residents are asked to report to their supervisor immediately incidents of apparent intoxication or drug usage among Residents, staff, employees or others.

### **NON-DISCRIMINATION AND ANTI-HARASSMENT POLICY I-39**

LLUMC will not tolerate any discriminatory employment practices that violate applicable equal employment opportunity laws. This includes, among other things, sexual harassment, unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature by a coworker, supervisor, or agent of the employer, constitute sexual harassment. All incidents of alleged sexual harassment shall be reported to the Human Resource Management Department. Policy I-39 "Non-Discrimination and Anti-Harassment" is available on the VIP Page of LLUMC's Intranet.

### **VIOLENCE IN THE WORKPLACE POLICY I-71**

LLUMC embraces a zero tolerance policy for workplace violence, recognizing that workplace violence is a growing nationwide problem that must be addressed by all employers. Consistent with this policy, acts or threats of physical violence, including intimidation, harassment, and/or coercion, which involve or affect the LLUMC or which occur on LLUMC property will not be tolerated. Policy I-71 "Violence in the Workplace" is available on the VIP Page of LLUMC's Intranet.

### **POSSESSION OF FIREARMS OR ILLEGAL WEAPONS**

With the exception of certain Security Officers specifically authorized to carry weapons, Residents, employees, patients or visitors are strictly prohibited from possessing, carrying, storing or using firearms or any other types of weapons on Medical Center premises. Any such possession, carrying, storing or use of firearms or any other type of weapon on Medical Center premises by a Resident or employee, will subject such persons to disciplinary action up to and including immediate dismissal.

### **CONDUCT OF SEARCHES**

LLUMC reserves the right to search any file, locker or other container provided by the Medical Center. Upon LLUMC's request, submission must be made to a search of any vehicle brought on LLUMC premises, or a search of any locker, package, purse, briefcase, toolbox, lunch box

or other container brought onto LLUMC premises, or a search of a desk, file, locker or any other stationary container provided by LLUMC.

### **USE AND CARE OF EQUIPMENT AND PROPERTY**

Equipment used in LLUMC is essential, valuable, and sometimes difficult to replace. It should be used carefully, responsibly and according to directions. Personnel are not to use LLUMC equipment for personal or home use, unless specifically requested to do so, and approved by a supervisor. If any equipment is not operating properly, report the problem immediately to the appropriate supervisor or department head.

LLUMC assumes no responsibility whatsoever for any loss or damage to personal property brought to work unless personal property is authorized in writing by the department head and specifically endorsed in writing by the LLUMC's property insurance policy. Call Risk Management (Ext. 44388) for further details.

### **ENDORSEMENTS**

No Resident may endorse or imply endorsement of a product or service in the name of LLUMC unless specifically authorized to do so in writing and signed by the appropriate administrators. This applies to work contracts with outside organizations, use of stationery or electronic media to make statements regarding products, services, or issues, and any dealings or communications that could imply endorsement by LLUMC.

# CORPORATE COMPLIANCE PLAN

LLUMC's Corporate Compliance Plan contains policies and guidelines to help personnel prevent and detect violations of federal and state laws and regulations. The Corporate Compliance Plan also establishes policies for auditing patient billing practices and actions to be taken if laws and regulations are violated.

A written Plan helps administration document and communicate policies and guidelines to all personnel for specific procedures that must follow federal and state laws.

Much of the Corporate Compliance Plan provides policies that must be followed when documenting patient care in the medical record, and billing patients and insurance companies for the services provided. Examples of other policies in the Plan include guidelines for: 1) keeping medical and financial records; 2) disposing of hazardous wastes to prevent harm to staff, community and environment; 3) purchasing patient supplies and medications; and 4) accepting and spending grant money received.

LLUMC's Corporate Compliance Plan, including links to the Compliance policies, and the Compliance Handbook can be accessed on the Intranet at the link below or by going to the VIP home page and clicking on "Compliance" under LLUAHSC departments. <http://wisdom.mc.llumc.edu/compliance/>

Because **Compliance is EVERYONE'S responsibility**, all Residents have an obligation to report any actions they believe are violations of the Corporate Compliance Plan. This requirement ensures that all Residents are watching for issues that could potentially pose risk to LLUMC. Residents are obligated to report potential compliance concerns such as falsifying a bill or a medical record, improper possession or use of medications or drugs, fraud, bribery, embezzlement, violations of environmental or workplace safety laws or false statements to the government and/or accrediting agencies (JCAHO), suspicious conduct, illegal actions, violations of policies, or other significant information you feel you cannot report to your supervisor.

In addition to reading the Compliance Handbook and the Compliance information included in BLUE BOOK and PURPLE BOOK, all Residents are required to complete annual compliance training throughout their residency with LLUMC.

➤ **TOLL FREE COMPLIANCE REPORTING LINE (800) 249-9953**

A toll free Quality/Compliance Reporting Line has been established as a part of LLUMC's Compliance Plan. The reporting line can be used to report suspicious conduct, illegal actions, violations of policies, or significant information you feel you cannot report to your supervisor. This telephone number is also published in the Campus Telephone directory.

## **An Overview of the False Claims Act and Federal Health Care Programs**

Loma Linda University Medical Center is committed to conducting our business of providing healthcare in an honest and ethical manner. To this end, we have consistently educated our employees, contractors, and/or agents about our business ethics. Recently, however, the US Congress passed the Deficit Reduction Act (DRA) of 2005, which directs healthcare providers

to specifically educate their employees, contractors, and/or agents about the state and federal laws that impose penalties for the submission of false claims, and the 'whistleblower' protections available to employees, contractors, and/or agents under those laws. Accordingly, the following material has been developed by LLUMC to satisfy the education requirements of the DRA and to make you aware of the mechanisms that we have in place to help prevent, detect and correct healthcare fraud and abuse.

## **Medicare**

Medicare is a federally funded health insurance program for persons 65 years and older and for individuals who have a long-term disability or end-stage renal disease. The Medicare Program offers health care items and services under the following four divisions:

- **Part A**- provides coverage for inpatient hospital care, skilled nursing facilities, and hospice care. It is financed through payroll taxes paid by employees and employers through the Federal Insurance Contribution Act (FICA) and through contributions of self-employed individuals. Payment for Part A services is received from contracted insurance companies known as Fiscal Intermediaries (FIs).
- **Part B**-covers services provided by physicians, nurse practitioners, home health care, ambulance services, clinical and diagnostic labs and durable medical equipment. Part B is financed through premium payments by enrollees, as well as contributions from general revenues by the federal government. Payment for Part B services is received from contracted insurance companies know as Carriers.
- **Part C**- (also called Medicare Advantage) is a program where beneficiaries receive Medicare covered services (i.e. Part A and Part B) through enrollment in a managed care organization. Coverage in a Part C health maintenance organization (HMO) or preferred provider organization (PPO) can include wellness and preventative health programs in addition to the traditional Medicare covered services. Part C is financed by payments made by the Centers for Medicare and Medicaid Services to Medicare Advantage contractors.
- **Part D**-prescription drug coverage was offered to Medicare beneficiaries effective January 2006. It provides coverage for outpatient prescription drugs and vaccines. Part D is administered by private Prescription Drug Plans and financed by premiums paid by Medicare beneficiaries.

## **Medicaid (Medi-Cal)**

Medicaid is a program that offers health care coverage and services for low-income and financially needy people. The Medicaid program is administered by the state (and is called Medi-Cal in the state of California), but jointly funded by both the federal and state governments. The Medi-Cal program reimburses providers directly for services provided to beneficiaries, with the state obtaining the federal share of the payment from funds from the federal government.

## **Oversight of the Medicare and Medi-Cal Programs**

The Centers for Medicare and Medicaid Services (CMS) is an agency within the U. S. Department of Health and Human Services that administers the Medicare and Medicaid (Medi-Cal) programs. Oversight of the Medicare program is conducted by the Office of Inspector General (OIG), which imposes civil monetary penalties and other administrative actions, including program exclusion against health care providers for fraud and abuse. The OIG refers cases of fraud to the U.S. Department of Justice for further criminal and/or civil action. Medi-Cal also has agencies to investigate fraud and abuse, and these cases are typically handled by the State Attorney General's Office.

## **Federal False Claims Act**

The False Claims Act is a federal statute that covers fraud involving any federally funded contract or program, including the Medicare and Medicaid (Medi-Cal) programs. This act establishes liability for any person who knowingly presents or causes to be presented a false or fraudulent claim to the U.S. government for payment. The term 'knowingly' is defined to mean that a person, with respect to information:

- Has actual knowledge of falsity of information in the claim
- Acts in deliberate ignorance of the truth or falsity of the information in a claim; or
- Acts in reckless disregard of the truth or falsity of the information in a claim.

The act does not require proof of a specific intent to defraud the US Government. Instead, health care providers can be prosecuted for a wide variety of conduct that leads to the submission of false or fraudulent claims to the government, such as knowingly making false statements, falsifying records, double-billing for items or services, submitting bills for services never performed or items never furnished, or otherwise causing a false claim to be submitted.

## **Claim**

For purposes of the False Claims Act, a "claim" includes any request or demand for money that is submitted to the US government or its contractors. This includes claims submitted on paper or electronically.

## **Liability**

Health care providers and suppliers (persons and organizations) who violate the False Claims Act can be subject to civil monetary penalties ranging from \$4,400 to \$11,000 for each false claim submitted. In addition to this civil penalty, providers and suppliers can be required to pay three times the amount of damages sustained by the US government. If a provider or supplier is convicted of a False Claims Act violation, the provider may be excluded from participation in federal health care programs and state health care programs that receive federal funds.

## **Qui Tam "Whistleblower" Provisions**

To encourage individuals to come forward and report misconduct involving false claims, the False Claims Act includes a 'qui tam' or whistleblower provision. This provision essentially allows any person with actual knowledge of allegedly false claims that have been submitted to the government to file a lawsuit on behalf of the US government. Such persons are referred to as 'relators.'

## **Qui Tam Procedure**

The whistleblower/relator must file his or her lawsuit on behalf of the government in a federal district court. The lawsuit will be filed "under seal," meaning that the lawsuit is kept confidential while the government reviews and investigates the allegations contained in the lawsuit and decides how to proceed.

## **Rights of Parties to Qui Tam Actions**

If the government determines that the lawsuit has merit and decides to intervene, the prosecution of the lawsuit will be directed by the U.S. Department of Justice. If the government decides not to intervene, the whistleblower can continue with the lawsuit on his or her own.

## **Award to Qui Tam Whistleblowers**

If the lawsuit is successful, and provided certain legal requirements are met, the qui tam relator or whistleblower may receive an award ranging from 15 to 30 percent of the amount

recovered. The whistleblower may also be entitled to reasonable expenses including attorney's fees and costs for bring the lawsuit.

### **No Retaliation**

Under the False Claims Act, employers are prohibited from retaliating or discriminating against whistleblowers. Any employee, contractor, and/or agent who is discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against as a result of the qui tam action is entitled to reinstatement, back pay, and other compensation arising from the retaliatory conduct by the employer. The law also prohibits retaliation against an employee, contractor, and/or agent for filing an action under the False Claims Act, investigating a false claim, or providing testimony for, or assistance in, a False Claim action.

### **State False Claims Act**

The State of California also has a False Claims Act that contains provisions similar to the federal False Claims Act. This act establishes liability for any person who knowingly presents or causes to be presented a false or fraudulent claim to the state government for payment.

Like the federal statute, health care providers can be prosecuted for a wide variety of conduct that leads to the submission of false or fraudulent claims, such as knowingly making false statements, falsifying records, double-billing for items or services, submitting bills for services never performed or items never furnished, or otherwise causing a false claim to be submitted to the state of California.

The penalties for making a false claim under the California False Claims Act are three times the amount of damages which the state or the political subdivision sustains because of the act of that person, the cost of the civil action brought to recover any of the penalties or damages and possible civil penalty of up to ten thousand dollars (\$10,000) for each false claim

### ***What does Loma Linda University Medical Center have in place to prevent, detect and correct false claims (fraud/abuse/instances of misconduct)?***

#### **Corporate Compliance Plan**

LLUMC is committed to meeting the regulatory requirements and has voluntarily implemented a Corporate Compliance Plan that consists of:

- A "Code of Conduct" which all employees, contractors, and/or agents are required to follow
- General policies and guidelines for all employees, contractors, and/or agents
- Specific policies and guidelines for employees, contractors, and/or agents performing certain jobs
- A definition of violations of policies and guidelines in the Plan, (called "wrongdoings,") and a description of how these wrongdoings will be investigated and punished, when necessary. The plan also implements specific requirements that employees, contractors, and/or agents report any known or assumed wrongdoings.

A copy of LLUMC's Compliance Plan can be accessed via the Intranet VIP Page: [http://wisdom.mc.llumc.edu/compliance/comp\\_plan\\_mc/mccp\\_appendix-a.htm](http://wisdom.mc.llumc.edu/compliance/comp_plan_mc/mccp_appendix-a.htm)

The oversight responsibilities for the Compliance Plan have been assigned to Dr. Linda Mason, LLUMC's Chief Compliance Officer. Dr. Mason is supported by the Compliance Department, which is responsible for:

- performing routine and violation-related compliance audits

- implementing compliance-related policies and procedures
- performing compliance-related employee training
- handling other compliance operational activities.

### **Policies and Procedures**

Loma Linda University Medical Center has developed policies and procedures that address how we detect and prevent fraud, waste, and abuse in federal and state healthcare programs. These compliance-related policies and procedures are available for viewing from the LLUMC Intranet VIP page or at the following web address:

[http://wisdom.mc.llumc.edu/compliance/hcp\\_appenda\\_toc.htm](http://wisdom.mc.llumc.edu/compliance/hcp_appenda_toc.htm)

Examples of important compliance policies are:

- Corporate Compliance Program Preventing Fraud and Abuse
- General Compliance Issues
- Billing and Coding Compliance
- Relationships with outside entities
- Medicare Cost Report
- Employment Compliance
- Research policies

### **Prevention**

Ideally, we would like to prevent misconduct from occurring. This is why we require participation in various compliance education activities. We believe that the more staff know and understand the regulatory requirements, the better prepared we are to prevent instances of misconduct that do not meet federal and state laws, accreditation requirements and the policies of LLUMC.

### **Detection and Resolution**

Healthcare is a highly regulated profession, which results in numerous laws and rules that impact us daily as we perform our jobs. Many times these laws and rules are not easy to interpret, or can be interpreted in different ways. Thus, errors are not always preventable. This is where the detection and resolution portion of our compliance program come into play.

Detection and resolution of issues are done in two ways:

1. Scheduled audits performed by each of the compliance team members.
2. Response to reported compliance concerns from the Compliance Hotline.

Each year the Compliance Department develops an audit work plan based on risk areas identified in the Office of the Inspector General's (OIG) work plan as well as risk areas identified in LLUMC's Compliance Plan. The Compliance Committee approves the audit work plan. Audit results are distributed as appropriate to the following: Department Heads, Vice Presidents, the Hospital Compliance Officer, Hospital Administration and Legal Counsel. When necessary, specific training related to improvements noted in the audit report is provided to the department. When an audit requires a corrective action plan (CAP), the CAP must be provided within 30 days. Follow up audits are performed by the Compliance Department to ensure that the appropriate corrections have been implemented.

Because **Compliance is EVERYONE's responsibility**, all employees, contractors, and/or agents have an obligation to report any actions they believe are violations of the Corporate Compliance Plan. This requirement ensures that all employee, contractor, and/or agents are watching for issues that could potentially pose risk to LLUMC.

You can report a compliance concern in two ways.

1. Call the Compliance Department at (909) 558-6455 or extension 66455.
2. Call the Employee Compliance Reporting Line at (800) 249-9953. This telephone number is also published in the campus telephone directory.

### **Compliance Reporting Line**

The Employee Compliance Reporting line is a special compliance reporting number that is answered by a contracted vendor. This line has been established to report compliance violations that staff feel cannot be reported to their supervisor. Employee, contractor, and/or agents may remain anonymous when reporting violations. Examples of wrongdoing that should be reported on this line include:

- Falsifying a bill or a medical record
- Improper possession or use of medications or drugs
- Fraud
- Bribery
- Embezzlement
- Violations of environmental or workplace safety laws
- False statements to the government and/or accrediting agencies (JCAHO).

All reports of wrongdoing are:

- Documented
- Thoroughly investigated through audits and interviews
- Reported to Administration and Legal Counsel when appropriate based on the seriousness of allegation
- Brought to closure and disciplinary actions and or corrective actions are implemented and monitored when necessary.

Staff reporting a concern anonymously needs to provide specific details regarding the issue so that it may be appropriately investigated. Additionally, the person taking the call will provide a report number as well as a call back date. This serves two purposes:

1. It allows staff to remain anonymous and still receive a response.
2. It allows Compliance to address any additional questions via the hotline while still protecting staff's anonymity.

All reports of wrongdoing will be thoroughly investigated and appropriate corrective action will be taken, if necessary.

In accordance with policy I-82, "Mandated reporting of Compliance Violations", there shall be no disciplinary action taken against an employee, contractor, and/or agent for reporting a concern (provided that the employee, contractor, and/or agent did not knowingly report false information) even if the outcome of the investigation determines that no violation occurred.

Under no circumstances shall retaliation occur against an employee, contractor, and/or agent who report a concern, including, but not limited to such actions as threats, intimidation, coercion and discrimination.

If you have any questions regarding the LLUMC Compliance Plan or your responsibilities as an employee, contractor, and/or agent under the LLUMC Compliance Plan, please call the Compliance Department at (909) 558-6455 (or extension 66455).

# HOUSE STAFF OFFICE

(909) 558-8131 Ext. 88131 within LLUMC

The House Staff Office (HSO) is the centralized administrative office for graduate medical education information, Residents and Fellows from all LLUMC training programs. HSO is located in Coleman Pavilion (CP) Room 21005. Phone: (909) 558-8131 from outside LLUMC; Ext. 88131 inside the Medical Center.

HSO is staffed as follows:

- Daniel Giang, M.D., Associate Dean and Director of Graduate Medical Education. Dr. Giang is also LLUMC's Vice-President for Medical Administration and Designated Institutional Official (DIO) for ACGME.
- Executive Director
- Martie Parsley, Ph.D., Graduate Medical Educator
- Teresa Meinken, Senior Administrative Assistant
- Lynne Wendtland, Administrative Secretary
- Amy Yin, Coordinator

Among the primary functions and concerns of the HSO is "taking care of" and providing assistance to Residents in all training programs at LLUMC. Items listed below may be referred to HSO staff; other items may be referred as well and if we don't have an answer, we'll try to help you locate where to find it:

- Benefits
- California Medical License application process
- Cash Advance (pay advance)
- Certificate of Completion of Residency Training
- DEA application – available on-line at [www.deadiversion.usdoj.gov](http://www.deadiversion.usdoj.gov)
- Disability, Group
- Duty Hours/Tracking
- Educational Expense Reimbursement
- Elective Requests
- Employment Verification
- Family Medical and Disability/Maternity Leaves – contact Human Resource Management
- Forms (Address Change, W-4, California Medical License, DEA, Health Coverage, etc.)
- Grievance
- Hospital Seal
- House Staff Clearance/Termination
- Leave of Absence
- Life Insurance, Group
- Long Distance Calling Code
- Mail
- National Provider Identifier (NPI)
- New Innovations (duty hours tracking mechanism)
- Notary Public Service
- Pagers – battery replacement, lost/stolen
- Paychecks

- Payroll Problems
- Phone/Address changes
- Photocopying
- Policies
- Prescription, California Security prescription pads
- Prescription Rubber Stamps
- Requirements
- Student Loan Deferment documentation
- Training Agreement (Contract)
- Training Verification
- Vacation Requests
- VPN Token – to access LLUMC information by computer from home
- W-2 Changes
- Work Injury Reporting

### **MAIL**

Mail for Residents is sent to the residency department. Residents are requested to clear out their mailboxes on a routine basis.

### **NOTARY PUBLIC SERVICE (Ext. 88131)**

Notary Public Service is available free of charge for Residents in HSO, **BY APPOINTMENT ONLY**, for documents relating to the training program, i.e., applications for USMLE, California Medical License forms, verification of training, etc. Other documents, such as out-of state licensing forms, grant deeds, etc., may be notarized for a charge of \$5.00 per signature. A valid driver's license must be presented for identification. Call Ext. 88131 to schedule an appointment. Please note that the Notary has the right to decline to notarize any document at her discretion.

### **STUDENT LOAN DEFERMENT**

Documentation for student loan deferments is provided by HSO, however, deferment forms must be obtained from lenders. Copies of completed documentation are kept on file in HSO.

### **RESIDENT MEDICAL AUXILIARY (RMA)**

The Resident Medical Auxiliary is an organization of Resident's spouses that provides support for Residents and their families. RMA is funded and supported by HSO and the National Auxiliary. Information concerning how to contact RMA is available in HSO, Ext. 88131.

#### **Resident Medical Auxiliary Mission Statement**

We are a group for resident's spouses who are committed to our spouses, one another, family, and community. Our goal is to provide support to one another, welcome and assist new and present members, as well as provide opportunities for service in our community, personal growth, enrichment and socialization.

**Welcome:** We would like to welcome you to the LLUMC community

The Resident Medical Auxiliary main purpose has always been to provide a network of support and services to the spouses and families of residents and fellows at LLUMC. Life of a resident is full of new challenges and long hours, which can be overwhelming and stressful when in a new environment...away from family and friends. Our goal is to help ease families into residency life.

**Social Gatherings:** We are here to serve and meet the many interests and needs of our

members and their families through many fun and entertaining social gatherings and events, providing a variety of activities and clubs for our RMA members. We also have opportunities to be involved and be of service in our community and surrounding areas.

Listed are the many socials and activities of RMA.

- Annual Fiesta Opener.... meeting of new and present members
- Book Club.... monthly discussion of interesting reads
- Culinary Club.... monthly gathering of sharing menu ideas, recipes, and sampling of delicious foods
- Girls Night Out.... time of relaxing and enjoying the company of females
- Men's Group.... for the male spouses-activities such as camping, biking, hiking trips
- Children's Group.... weekly outdoor park fun with occasional arts/crafts
- Helping Hands.... a support system of providing meals and assistance when needed (arrival of a new baby, illness in the family)

**Contact us with any questions at [rmalomalinda@yahoo.com](mailto:rmalomalinda@yahoo.com)**

# TRAINING APPOINTMENT

## INITIAL APPOINTMENT/ORIENTATION

Appointments are for one year at a time. **All Residents commencing training at LLUMC are required to attend all scheduled orientation activities.**

**PGY-1 RESIDENTS** report Wednesday, June 24 through Monday June 29, 2009, for hospital orientation, personnel processing and departmental orientation. **PGY-1 Residents officially start date on service on Tuesday, June 30, 2009.**

**PGY-2 to PGY-7 RESIDENTS** report Wednesday, July 1, 2009 at 7:00 AM for hospital orientation, personnel processing, etc.

At the department's discretion, and with approval of the HSO, some appointments may start at other times during the year; however, any such appointment will only be permitted to begin on the 1<sup>st</sup> day of the month.

**LEVEL OF APPOINTMENT:** The level of appointment is set at the time of initial appointment as determined by the Program Director in accordance with the level recognized by the specialty board. The Associate Dean and Director must approve any exceptions.

## ADDITIONAL YEAR APPOINTMENT

Appointment to an additional year of graduate medical education training, if any, is accomplished by affirmative recommendation from the specific Program Director and concurrence of the Graduate Medical Education Committee (GMEC). It is reasonable for both parties to expect that commitments for reappointment will be made early enough so that alternative arrangements can be made if a Resident is not reappointed or chooses not to continue. It is expected that these decisions will be made at least four (4) months before the end of any training agreement year.

## USMLE STEP 2

Failure to pass USMLE Step 2 or COMLEX 2 by the end of the PGY-1 year (12 months of ACGME training) will result in automatic **NONRENEWAL OF THE TRAINING AGREEMENT.**

## USMLE STEP 3

Residents in the first year of postgraduate training at LLUMC are **REQUIRED** to take and pass USMLE Step 3 and submit results to HSO by the end of the 8<sup>th</sup> month of training. HSO will reimburse fees for USMLE Step 3 if successful results are submitted to HSO by this deadline.

Funds are void after the deadline. If Step 3 is **NOT PASSED**, no funds will be available. PGY-1 Residents are provided two days off with pay to take USMLE Step 3 for the **first time**. If it is necessary to take Step 3 a second time, vacation time must be used.

There is no fee reimbursement of USMLE Step 3 fees for Residents at other year levels. Residents at all other year levels are required to use vacation time to take USMLE Step 3.

Failure to pass USMLE Step 3 prior to the conclusion of the PGY-2 academic year will result in automatic **NONRENEWAL OF THE TRAINING AGREEMENT.**

## **RESPONSIBILITY, GENERAL**

The Resident is responsible to the LLUMC President, the Associate Dean and Director of Graduate Medical Education, the Program Director and attending physician on the service, and the Executive Director of HSO, in regard to all general regulations and policies. The Resident shall devote full time and effort to the duties of the residency program.

## **RESPONSIBILITY FOR THE PATIENT**

Each patient to whom a Resident is assigned will be under the supervision of an attending physician to whom the Resident is responsible for the care of all patients on the Resident's service. The Resident must see new patients promptly and leave orders. The Resident must assure that his/her patients are continuously cared for. The Resident must advise her/his colleagues who are on call regarding the status of each patient on the service. It is the responsibility of the more senior Resident(s) on a service to oversee the work of the junior Resident(s) and to assist them in the care of patients and in the performance of procedures.

## **RESPONSIBILITY, PERSONAL**

Residents are expected to:

1. Develop a personal program of learning to foster continued professional growth with guidance from the teaching staff.
2. Participate fully in safe, effective and compassionate patient care under supervision, commensurate with their level of advancement and responsibility.
3. Participate fully in the educational activities of their program and, as required, assume responsibility for teaching and supervising other Residents and students. Refer to Loma Linda University School of Medicine's "LLUSM Objectives for Medical Student Education" section for information regarding teaching third and fourth year medical students.
4. Participate in institutional programs and activities involving the medical staff and adhere to established practices, procedures, and policies of the institution.
5. Participate in institutional committees and councils, especially those that relate to patient care review activities.
6. Apply cost containment measures in the provision of patient care.
7. Participate in evaluation of the quality of education provided by the program.
8. Develop an understanding of ethical, socioeconomic, and medical/legal issues that affect graduate medical education.
9. Comply with established ethical behavior and practices.
10. A Resident may have suggestions for process improvements or concerns about another healthcare worker or process. Such suggestions or concerns may be reported to the Quality Hotline 1-888-478-3555 OR a "Report of Staff Concern" form can be completed and submitted to Patient Safety and Reliability (PSR) located at Mt. View Plaza Suite C, Ext 33716, to assure confidentiality and improvement.

## **PERFORMANCE EVALUATION**

The position of Resident involves a combination of supervised, progressively more complex, independent patient evaluation and management functions and formal education activities. The Resident's competence, knowledge, skills and professional growth is evaluated on at least a semi-annual basis. An unsatisfactory evaluation can result in required remedial activities, temporary suspension from duties, or termination of residency education and employment. The program maintains a confidential record of these evaluations. The confidential file maintained by the Program Director is intended for advisement and is not considered a part of the Resident's official HSO personnel file. Program level corrective action (such as a letter of warning or an imposition of informal probation with stated conditions) is documented in the program file, but is not a part of the permanent academic record unless the

program pursues formal corrective action. Residents may review the contents of their evaluations and may contest, at the program level, the evaluations and/or documentation of corrective action contained in the file.

The Resident's official HSO personnel file forms the basis for institutional recommendations to outside inquiries regarding the Resident's performance. Information concerning the promptness of chart completion may also be included in the Resident's HSO personnel file. Formal corrective action imposed by the institution is documented in this file and may be available to inquirers. Programs provide periodic written evaluations of the performance of individual Residents to the HSO, which become part of the Resident's permanent academic record.

Residents may request a copy of their official permanent file, with the exception of recommendation letters received during the application process, upon appropriate **written** request to HSO. Copies will be provided within ten (10) working days from receipt of the request. Resident may submit a written rebuttal contesting information in the file.

**ACGME COMPETENCIES:** The Accreditation Council for Graduate Medical Education (ACGME) has implemented a requirement that Residents must obtain competence in the six areas listed below to the level expected of a new practitioner. Accreditation of a given residency is contingent on this requirement being met. Programs define the specific knowledge, skills, behaviors, and attitudes required, and provide educational experiences as needed in order for Residents to demonstrate the following:

1. ***Patient care*** that is compassionate, appropriate, and effective for the treatment of health programs and the promotion of health;
2. ***Medical knowledge*** about established and evolving biomedical, clinical, and cognate sciences, as well as the application of this knowledge to patient care;
3. ***Practice-based learning and improvement*** that involves the investigation and evaluation of care for their patients, the appraisal and assimilation of scientific evidence, and improvements in patient care;
4. ***Interpersonal and communication skills*** that result in the effective exchange of information and collaboration 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 patients of diverse backgrounds;
6. ***Systems-based practice***, as manifested by actions that 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.

### **AMA COMPETENCY MODULE PROGRAM**

The Graduate Medical Education Committee at LLUMC provides an Internet-based resource for programs to use for teaching and assessing the six general competencies, to fulfill ACGME requirements. This module series augments other educational activities the individual programs have designed to further enhance the program's responsibilities.

Residents/ Fellows are required to complete the following three Modules that are specifically for LLUMC House Staff: Whole Person Care, Communication with Healthcare Personnel, The Resident as Teacher and Evaluator. Other Modules may be required if assigned by the Program Director.

**AMA MEMBERSHIP:** LLUMC provides residents with membership in the AMA in order to secure access to this program. *If you do not wish to become an AMA member, please inform HSO of this fact.* You will still be able to have access to the educational program, but you will not be enrolled as an AMA member.

The AMA Introduction to the Practice of Medicine (IPM) program is a Web-based educational series developed through collaboration with the Ohio State Medical Association and the Ohio State University Medical Center. The series is designed to help meet the dual challenges of educating residents in ACGME general competency requirements and institutional compliance requirements and supplementing their education in a variety of nontraditional curricular topics.

The IPM includes a comprehensive library of 23 learning modules including four modules that address hospital compliance issues. After viewing each module, residents complete a post-assessment test and evaluation. Residents may also print a certificate for each module completed that can be part of their portfolio.

The IPM series is available 24 hours a day, so residents can complete the modules and assessments at their own convenience. Program administrators can create reports to track performance at the individual, program and institution levels.

All modules are reviewed by an external advisory panel and updated every three years. The modules provide training programs with supplemental materials that enhance and reinforce current program activities that address the general competencies.

**IPM MODULE LIBRARY (as of November 1, 2008):**

- Compliance
- Interpersonal and Communication Skills
- Patient Care
- Practice-Based Learning and Improvement
- Professionalism
- Systems-Based Practice

**RESIDENT WORK HOUR GUIDELINES POLICY GMEC-12,**

Individual training programs are responsible for developing and publishing expectations regarding educational responsibilities, service obligations, working conditions, schedules and department specific policies and procedures governing their Residents.

Residents are required to adhere to duty hour requirements as outlined in Policy GMEC-12 regardless of where they are rotating and to log duty-hours using New Innovations – information included below. Program Directors and departmental Quality Improvement Committees will be notified when Residents are over the maximums outlined.

The following is a limited summary of the RESIDENT WORK HOUR GUIDELINES POLICY:

- Maximum 80 hours per week averaged over a 4 week rotation
- Maximum 12 hour shift in the emergency room for physicians with primary patient care responsibility
- Maximum 24 hours on-site duty during which new patients are evaluated. Up to 6 additional hours permitted for patient transfer
- On-site 24 hour shifts no more than once every three days

- Four 24-hour periods (1 day in 7) free of patient care responsibilities each month, averaged over four weeks.
  - 10 hours off between duty periods and after call
  - Three weeks (15 Monday-Friday days) vacation per year for PGY-1; four weeks (20 Monday-Friday days) per year for PGY-2 through PGY-8 Resident
  - Holidays, sick leave and Family Medical Leave as required in the Training Agreement
- During months with legal holidays, i.e. January, February, May, July, September, November and December, Residents will have one additional day off for a total of 5 (five) days off duty. During the month of November, there are two official holidays – at the discretion of the Attending Physician and/or Program Director, the Physician may have 5 (five) days off during October and 5 (five) days off during November, OR 4 (four) days in October and 6 (six) days in November

Residents are expected to fulfill all responsibilities and obligations of the Service to which they are assigned, in addition to LLUMC policies and procedures. Individual service policies and procedures regarding "on call" responsibilities must be followed.

Arrangements for time off and rotation to other hospitals are made through each residency program. HSO must be notified at least three months before Resident leaves for vacation or assignment elsewhere.

### **RESIDENT WORK HOUR TRACKING**

LLUMC uses ***New Innovations*** to track duty/work hours to verify Residents are in compliance with ACGME guidelines as noted in the policy. Residents are **REQUIRED** to record work hours on ***New Innovations*** on a weekly basis. This includes hours worked at each facility/location.

Contact your Residency Coordinator or Amy Yin at HSO Ext 88131 if you are having difficulty or questions concerning recording your work hours.

### **NEW INNOVATIONS (NI)** [www.new-innov.com](http://www.new-innov.com)

***New Innovations*** is a web-based residency management system that has several uses at LLUMC.

**Residents must access NI**, and from the ***Welcome Page*** click on "***Help***" then "***Additional Tools***" and review "***Training for Residents***" to learn how to navigate through the various functions. To access the system:

- Institution login is case sensitive: **LLUMC** (all caps)
- Password should be your **first initial last name** – all lower case letters without spaces. If this doesn't work try the first two initials of your first name then your last name, i.e. John Smith would be josmith). If you still have problems logging in, page [tmeinken@my2way.com](mailto:tmeinken@my2way.com)

The following are a few of the functions NI is used for at LLUMC:

- **Official communication from HSO and Programs** will be sent to your Loma Linda email address (llu.edu). It is YOUR RESPONSIBILITY to check your LLUMC email account frequently.
- **Log/Record all Duty Hours:** Residents are required to log/record all duty hours on NI and to "signoff: on duty hours at least twice a week.
- **Evaluations** of/by both Resident and Faculty are completed on NI

- **Reminders** will automatically be sent to your email address – this may include reminders to renew CPR, Medical License, annual health clearance, Compliance Training, etc. – please ***check your email frequently***. The email address is defaulted to your LLUMC email; should you wish to us another email inform HSO or your Coordinator. **(If this doesn't work, page Teresa at tmeinken@my2way.com)**
- **Notices** for Residents and Fellows are posted on the Welcome Page. Please look at the Welcome Page frequently.

NI is the **main database for Resident Information** at LLUMC's HSO. Information includes demographics, education, residency training, license, pager, etc.

**HOUSE STAFF GRIEVANCE POLICY AND PROCEDURE POLICY GMEC-20** must be utilized if a Resident wishes to challenge an action to place Resident on probation, involuntary leave of absence, require repetition of a portion of training, suspend, terminate, deny renewal of the Agreement, or deny a Certificate from the LLUMC Residency Training Program.

### **CONFIDENTIAL ADVISORS for RESIDENTS**

Residents are always welcome to talk with HSO personnel; however, Confidential Advisors are also available to you. A confidential Advisor will listen to your concerns, complaint(s) or problems and advise you in finding solutions. They are here to help and guide you. Your discussions with him/her are **confidential**.

- **CONTACT INFORMATION:**
  - Cynthia Tinsley, M.D., Pediatrics  
Best contact X 44174  
(Emergency only: [ctinsley@my2way.com](mailto:ctinsley@my2way.com))
  - Besh Barcega, M.D., Emergency Medicine  
Best contact [bbarcega@llu.edu](mailto:bbarcega@llu.edu)
  - John Kim, M.D., Otolaryngology  
Best contact [jkim8@llu.edu](mailto:jkim8@llu.edu)  
(Emergency only: [jokin@my2way.com](mailto:jokin@my2way.com))

### **ADDITIONAL RESIDENT POLICIES**

The policies listed below are available in HSO and on the Welcome Page of New Innovations. Residents should become familiar with these and other policies listed in the House Staff Manual

- **RESIDENTS LIVING IN PROXIMITY TO LLUMC (\*POLICY GMEC-25)**
- **ROMANTIC RELATIONSHIPS AND DATING (POLICY GMEC-15)**
- **RESIDENT MISTREATMENT/STANDARDS OF PROFESSIONAL BEHAVIOR (POLICY GMEC-17)**
- **RESIDENT PROMOTION, DISMISSAL AND GRADUATION (POLICY GMEC-09)**
- **SUPERVISION OF RESIDENTS (POLICY GMEC-10)**
- **CORRECTIVE ACTION (POLICY GMEC-04)**
- **PHYSICIAN IMPAIRMENT AND SUBSTANCE ABUSE (POLICY GMEC-23)**
- **MOONLIGHTING (POLICY GMEC-26)**

### **CALL ROOMS**

Contact the Senior Resident on your assigned service for location and access to call rooms. Please notify HSO (ext. 88131) of any items that may need attention, replacement or repair in these areas. Reminder that LLUMC operators DO NOT make wake up calls!

## **RESIDENT LOUNGE**

The Resident Lounge is located in the Student Entrance of A-Level. Access is by use of the Lounge Code, which is given at Orientation, or Residents may call HSO ext. 88131 for the code. Snack items are stocked in the Lounge periodically and are available on the honor system. Please notify HSO, ext. 88131, if the Lounge needs attention.

## **OUTSIDE EMPLOYMENT AND PRACTICE**

Residents may not receive any compensation, either directly or indirectly, from patients or their families for any services performed. Unlicensed Residents shall not perform any professional service for any patient outside the scope of their residency training, nor will they be permitted to collect fees from persons under treatment as outpatients.

## **ELECTIVES AT LLUMC OR THE LOMA LINDA VA HOSPITAL**

Arrangements for electives at LLUMC or the Loma Linda VA Hospital are made between the Resident, the Program Director and the faculty supervisor of the proposed elective. An "Elective Request" Form must be completed, including signatures of Resident, Faculty supervisor of the elective, and Program Director. The completed form must be turned in to HSO two months PRIOR to beginning the elective. If vacation/leave time will be taken during the elective period, the signature of the Resident, the faculty supervisor and Program Director is required on the Vacation Request Form as well. In some cases, the Chief Resident must also approve the request.

## **OUTSIDE/AWAY ELECTIVES**

Electives at sites away from LLUMC may only be done if approved for credit by the Resident's Program Director; however, **LLUMC does not continue salary and malpractice coverage during outside/away electives**. One exception to this policy is elective time spent with LLUMC faculty on a Mission Trip Elective (see below).

## **MISSION TRIP ELECTIVES**

**OVERVIEW:** Resident should request approval of a Mission Trip at least 3-6 months in advance of the travel time. Initial approval of a Mission Trip is granted by each individual program/department at the request of the Resident. All Mission Trips are reviewed by **GOAC (Global Outreach Administrative Committee)**. If Mission Trip is approved by GOAC, HSO will continue Residents' salary and benefits. If Mission Trip is approved by the program/department, however denied by GOAC, the Residents' salary and benefits continue as they would if the Resident was on vacation, however, they will not receive workers compensation or malpractice coverage. It must be understood that this would be considered vacation or leave time and the non-approved mission trip is not a sponsored trip by LLUMC. (If all leave time has been used salary and benefits will not be continued.)

- **ELIGIBILITY REQUIREMENTS:** Resident must be in good standing within the program/department.
- **PROCESS:**
  - **Resident** – Makes a request to the program/department by putting the request in writing, stating location of mission trip, name and CV of supervising physician, goals & objectives of mission trip, OR call **GOAC** and ask for their application packet, x88541. (Pediatric Residents may use the "GOPEDS" application).
  - **Program** – Approves resident request.
  - **GOAC** – Reviews mission trip requests and informs HSO of its decision.
  - **HSO** – Will inform the program/department of GOAC's decision and if

salary/benefits will continue.

- **HSO** – If Mission Trip is approved, HSO will inform Risk Management of the residents' travel dates, location, etc.

### **MEDICAL STAFF COMMITTEES**

Residents beyond the PGY-1 year may be assigned committee responsibility on LLUMC Medical Staff committees as an official part of the training program. Regular committee attendance is expected.

### **CONFERENCES AND MEETINGS**

Residents are expected to attend general meetings specified by their program, all departmental conferences and autopsies of the current service, unless unavoidably detained by duty or vacation. Attendance at other departmental conferences is encouraged when these do not conflict with scheduled duties.

### **RESIDENT ADVISORY COUNCIL (RAC)**

Peer-selected representatives from residency programs are members of the Resident Advisory Council (RAC), which usually meets on the 4<sup>th</sup> Friday of each month with Dr. Giang, Vice President for Medical Administration, and the Executive Director of HSO. The purpose of RAC is to provide a forum for exchange of information between Residents and Administration. Any problems, questions, etc. that you would like to have discussed should be shared with your RAC representative or your Chief/Senior Resident or referred to HSO for the agenda.

### **ORDERING DIAGNOSTIC STUDIES**

All orders written by Residents must include the Resident's signature, pager number and the name of the attending physician on whose behalf the orders are written.

Example: *Resident signature (9999)/for Dr. Attending.*

Orders for diagnostic studies and tests will not be processed without an **appropriate reason** written with the order. A reason must be provided for all diagnostic tests ordered. This includes requests for such tests as CXR, EKG, and Cytology - "Rule Out" is not an acceptable reason. If a definitive diagnosis is not known, use actual symptoms. This allows the test interpreter to make sure the report answers your specific question. Third party payors require a test to have a reason before they will reimburse for it. Clinical Laboratory tests (e.g. CBC or PT) also require a reason and this must be written, especially in ambulatory settings like the Pediatric Teaching Office, Primary Care Clinic, Family Medicine Clinic, Urgent Care and the ER.

Unit secretaries will not take off orders for diagnostic testing without an appropriate reason; they have been instructed to page the writer to have the order rewritten. The invalid order will be circled and flagged for your convenience so it can be rewritten with an appropriate reason.

DO NOT write the reason on the original order because such an order can be "buried" beneath subsequent orders and might be missed.

### **DRUG ENFORCEMENT REGISTRATION (DEA)**

California licensed physicians may apply for a Drug Enforcement Administration Registration number by completing DEA Form #224. Application for DEA registration may be accomplished on-line at <http://www.deadiversion.usdoj.gov/>. It is recommended that **licensed Residents** obtain and maintain a current DEA registration. A copy of the DEA registration should be forwarded to HSO within ten (10) days of receipt. A rubber stamp that includes Name, License #, and DEA # is available by request to HSO.

## **PRESCRIPTIONS (LLUMC Institutional Security Prescription Pads)**

House Staff Office issues LLUMC Institutional Security Prescription Pads to Residents who do not have their own pre-printed pads. Health care providers must provide HSO with a copy of their DEA license prior to being issued prescription pads.

1. These prescriptions may be issued to patients of Loma Linda University Medical Center (including Children's Hospital and East Campus), University Health Care (e.g. FMO) and Behavioral Medicine Center. Do NOT use them for patients at other institutions.
2. These prescriptions are to be issued to patients under the supervision of a faculty member.
3. If you routinely prescribe controlled substances, you should have prescription pads pre-printed with your name (contact your residency program).
4. Health care providers must provide HSO with a copy of their DEA license prior to being issued the prescription pads.
5. All prescriptions must comply with state and federal law.  
For questions about the new SB 151, see:  
[http://www.pharmacy.ca.gov/consumers/prescribe\\_dispense.htm#sb151](http://www.pharmacy.ca.gov/consumers/prescribe_dispense.htm#sb151).
6. Only use security prescriptions for controlled substances. For a list of controlled substances, see <http://www.usdoj.gov/dea/pubs/scheduling.html>.
7. All duplicates must be returned to HSO
8. Any unused prescriptions must be returned to HSO at completion of your residency program.
9. Unauthorized use or misuse of these prescriptions will result in corrective action including the inability to be issued institutional prescription pads (meaning you would need to purchase your own supply), termination from the residency program or criminal prosecution.
10. Keep these pads secure! Report lost/ Pads to HSO (ext. 88131 or (909) 558-8131) immediately or contact Security (ext. 44320) if HSO is not open.

## **SUSPENSION**

Suspension from the training program without pay may result for failure to comply with LLUMC policies and procedures, including, but not limited to, completion of annual requirements, completion of medical records, both at LLUMC and affiliate facilities, or for disciplinary matters.

During suspension the Resident may not participate in any aspect of patient care, including on-call responsibilities, operative and delivery activities. Residents who ignore this policy will be subject to further disciplinary action. Suspension will remain in effect until the reason for suspension has been resolved. A Resident who has repeated suspensions may be required to appear before the GMEC.

## **COMPLETION OF TRAINING - TERMINATION & HOUSE STAFF CLEARANCE**

Residents and Fellows completing training at LLUMC are required to complete termination processes with HSO, i.e. return of pager, ID badge, etc. All termination information, including the **House Staff Clearance Form** and **"Exit Interview Questionnaire"** must be submitted to HSO before leaving LLUMC to document return of LLUMC property, completion of medical records at LLUMC and Affiliates, and clearance from the residency program office. Final signatures will not be provided until the last day at LLUMC.

## **CERTIFICATE**

An appropriate certificate will be issued to each individual upon successful completion of the first year of postdoctoral training (twelve months of PGY-1 training), and upon successful completion of the required number of years of training in a graduate medical education program, after confirmation from the Program Director that all requirements of the program

have been completed. Issuance of the certificate requires that all Termination and House Staff Clearance procedures have been completed.

# MANDATORY REQUIREMENTS AND DOCUMENTATION

## REQUIRED DOCUMENTATION

All Residents/Fellows commencing training at LLUMC are REQUIRED to provide the following documentation to **HSO BEFORE authorization to begin training will be issued**. Payroll and/or fringe benefits will be activated for Residents assigned to LLUMC payroll only after all documentation is on file in HSO.

- Completion of LLUMC's employment on-line sign-up and provision of all documentation required by Human Resource Management. This includes Original Social Security Card, passing a Background Investigation which includes criminal, federal, OIG and DMV driver's record, clearance from Occupational Medicine confirming completion of pre-employment physical examination, mandatory urine drug screening, two TB tests and immunization verification
- Current Basic Life Support (BLS) **OR** Advanced Cardiac Life Support (ACLS) certification card. Pediatric Advanced Life Support (PALS) is acceptable for Residents in Pediatrics or Pediatric Subspecialties.
  - NOTE: Residents in Anesthesiology, Emergency Medicine, Family Practice, Internal Medicine, OB-GYN, Psychiatry, Radiology and Surgery, are **REQUIRED by specific RESIDENCY PROGRAMS, TO OBTAIN ACLS certification**. Check with your Program Coordinator for specific requirements regarding maintaining ACLS certification. Pursuant to program requirements, Residents in other programs may also be required to obtain/maintain ACLS certification
- Postgraduate Training Registration Form OR copy of CA license, if licensed
- Visa/Work Authorization, if applicable
- Signed Graduate Medical Education Training Agreement
- Code of Conduct & PHI security forms
- National Provider Identifier (NPI) number
- Orientation attendance
- Fit Testing (done during Orientation)
- Fire Training (done during Orientation)

## ANNUAL REQUIREMENTS

The following items must be completed and documented with HSO on an annual basis in order to continue into the next contract year. Failure to provide such documentation to HSO will result in **SUSPENSION** from the training program, without pay pending receipt of current documentation in HSO.

- **Health Clearance** from Employee Health Service - a repeat TB or chest x-ray (determined by EHS) must be completed in order to obtain EHS clearance.
- **CPR Certification** (Ext. 44977). Current BLS **OR** ACLS certification is **REQUIRED** at all times during training; documentation must be on file in HSO. **PALS** certification meets this required for Pediatric specialties.

Life Support Education Department, located in the University Arts Building on Taylor Street in Loma Linda, provides BLS and ACLS training. LLUMC covers the cost of CPR certification for ALL Residents. LSE books and/or review courses are not covered by LLUMC, however, required Basic Life Support and Advanced Cardiovascular Life Support books by the American Heart Association are available for check-out in HSO.

Payment is covered for only one annual appointment for BLS and one appointment for ACLS. If an appointment is missed, any subsequent appointment will be the Resident's personal financial responsibility. Contact LSE (909) 558-4977 or Ext. 44977 to schedule appointment as early as possible, as LSE classes fill up rapidly.

➤ **Fit Testing**

All Residents and Fellows are required to be fit tested annually.

➤ **REQUIRED ON-LINE IN-SERVICES**

• **B.L.U.E. BOOK (Basic Learning Units for Employees)**

Information for legally required in-service on items such as universal precautions, infection control, etc. is contained in B.L.U.E. Book and is completed on-line. Instructions for completing B.L.U.E. Book will be provided by HSO. Completion of the B.L.U.E. Book test is required annually throughout residency training.

• **PROFESSIONAL COMPLIANCE** – completion of Compliance training is required annually.

• **ANNUAL RESIDENT SURVEY**

**NATIONAL PROVIDER IDENTIFIER (NPI)**

LLUMC requires all Residents & Fellows to obtain a National Provider Identifier (NPI). This will be your lifetime, professional ID. Upon completion of training it is your responsibility to update your address on-line so that a current practice address is always available.

**CALIFORNIA MEDICAL LICENSE REQUIREMENTS**

As you enter into the twilight zone of California medical licensing, please refer to the information below. Select the portion that relates to your situation and if you have any questions please contact HSO, Ext. 88131.

***This information applies to all Residents and Clinical Fellows in programs sponsored by Loma Linda University Medical Center (LLUMC) and to other Residents and Clinical Fellows under the supervision of the LLUMC Graduate Medical Education Committee (GMEC).***

**U.S. MEDICAL SCHOOL GRADUATES**

- Are REQUIRED to successfully complete 12 months of ACGME accredited graduate medical education (GME) training in order to be eligible for licensure in California.
- May participate in ACGME training for a maximum of 24 months (regardless of whether or not credit was given for the training) without a medical license in California.
- At the conclusion of 24 months of GME training, a valid and unrestricted California medical license is required in order to continue in the training program.

**US PGY-1 RESIDENTS ARE REQUIRED to:**

1. Complete a Medical Board of California (MBC) "***Postgraduate Training Registration Form***" prior to beginning training at LLUMC; form must be turned in to HSO for submission to the MBC.

2. Submit a **completed 5-page application** for a full and unrestricted California Medical License **and copy of the Live Scan fingerprint form (“completed application” hereafter)** to HSO by the end of the **8<sup>th</sup> month of training** (end of February for those who start in June/July).
  - a) LLUMC will pay the initial license fee out of the Resident’s educational fund, if the “completed application” is submitted to HSO by the above deadline.
  - b) If the “completed application” is **not** submitted to HSO by the above deadline, the Resident’s Program Director will be notified that the application has not been submitted within the required timeframe and the educational fund money will be forfeited.

**US PGY-2 RESIDENTS Starting Training at LLUMC ARE REQUIRED to:**

1. Present a full and unrestricted California Medical License to HSO for photocopying, **OR** complete a Medical Board of California (MBC) **“Postgraduate Training Registration Form”** prior to beginning training at LLUMC; form must be turned in to HSO for submission to the MBC.
2. Submit a **completed 5-page application** for a full and unrestricted California Medical License **and copy of the Live Scan fingerprint form (“completed application” hereafter)** to HSO **within three (3) months** of beginning the PGY-2 year at LLUMC. All other required portions of the application should be requested as instructed.
  - a) LLUMC will pay the initial license fee out of the Resident’s educational fund, if the “completed application” is submitted to HSO by the above deadline.
  - b) If the “completed application” is **not** submitted to HSO by the above deadline, the Resident’s Program Director will be notified that the application has not been submitted within the required timeframe and the educational fund money will be forfeited.
3. Obtain a California Medical License prior to completion of the 24<sup>th</sup> month of postgraduate education.
  - a) Failure to obtain a California Medical License by completion of the 24<sup>th</sup> month of ACGME training will result in **NON-RENEWAL OF THE TRAINING AGREEMENT AND TERMINATION FROM LLUMC** effective on the last day of the current Training Agreement.
  - b) In the event of termination, Resident must report to the HSO by 9:00 on the morning after termination to sign termination paperwork and turn in the ID Badge, pager, and VPN Token, if applicable. See APPLICATION FOR RE-ENTRY AFTER TERMINATION BELOW for information concerning the possibility of re-entering the training program.

**US PGY-3 THROUGH PGY-8 RESIDENTS & FELLOWS BEGINNING TRAINING AT LLUMC**

Are **REQUIRED** to present a full and unrestricted California Medical License to HSO before they will be authorized to begin training at LLUMC. Failure to obtain a California medical license will result in delay in starting the training program, and may result in withdrawal of the training position offer.

**INTERNATIONAL MEDICAL SCHOOL GRADUATES (IMG)**

- Must submit an Updated Application to the Medical Board annually until licensed.
- Are **REQUIRED** to successfully complete 24 months of ACGME accredited graduate medical education (GME) training in order to be eligible for licensure in California.
- May participate in ACGME training for a maximum of 36 months (regardless of whether or not credit was given for the training) without a medical license in California.

- At the conclusion of 36 months of GME training, a valid and unrestricted California medical license is required in order to continue in the training program.

### **IMG PGY-1 RESIDENTS ARE REQUIRED to:**

1. Complete a Medical Board of California (MBC) “**Postgraduate Training Registration Form**” prior to beginning training at LLUMC; form must be turned in to HSO for submission to the MBC.
2. Submit a **completed 5-page application** for a full and unrestricted California Medical License to HSO by the end of the 8<sup>th</sup> month of training (end of February for those who start in June/July).

### **IMG PGY-2 RESIDENTS ARE REQUIRED to:**

1. Complete a Medical Board of California (MBC) “**Postgraduate Training Registration Form**” prior to beginning training at LLUMC; form must be turned in to HSO for submission to the MBC.
2. Submit a **completed 5-page application** for a full and unrestricted California Medical License to HSO **within three (3) months** of beginning the PGY-2 year at LLUMC. All other required portions of the application should be requested as instructed.
  - a) If the “completed application” is submitted to HSO by the 3<sup>rd</sup> month after completion of the PGY-2 year of training, LLUMC will pay the remaining license fee out of the Resident’s educational fund.
  - b) If the “completed application” is **not** submitted to HSO by the end of the 3<sup>rd</sup> month, the Resident’s Program Director will be notified that the application has not been submitted within the required timeframe and the educational fund money will be forfeited.
3. Obtain the California Medical License prior to the completion of the 36<sup>th</sup> month of postgraduate education.
  - a) Failure to obtain the California Medical License by the completion of the 36<sup>th</sup> month of ACGME training will result in **NON-RENEWAL OF THE TRAINING AGREEMENT AND TERMINATION FROM LLUMC** effective on the last day of the current Training Agreement.
  - b) In the event of termination, Resident must report to the HSO by 9:00 on the morning after termination to sign termination paperwork and turn in the ID Badge, pager, and VPN Token, if applicable. See APPLICATION FOR RE-ENTRY AFTER TERMINATION BELOW for information concerning the possibility of re-entering the training program.

### **IMG PGY-4 THROUGH PGY-8 RESIDENTS & FELLOWS BEGINNING TRAINING AT LLUMC:**

Are REQUIRED to present a full and unrestricted California Medical License to HSO before they will be authorized to begin training at LLUMC. Failure to have obtained the California medical license will result in delay in starting the training program, and may result in withdrawal of the training position offer.

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### **APPLICATION FOR RE-ENTRY AFTER TERMINATION**

1. If Resident receives a valid, unrestricted California Medical License within 30 days after termination, he/she may request re-entry into the training program
  - a) Re-entry into the training program is NOT automatic.
  - b) The Program Director’s written approval is required. Approval, if any is entirely at the discretion of the Program Director.
2. An application including a statement verifying what activities applicant has been involved with during the time off, the Program Director’s written approval, and a copy of

the California Medical License, must be submitted to HSO within 30 days after termination. If documentation is not received in HSO within **30 days after termination**, **the previously held position will no longer be available.**

**REQUIRED DOCUMENTATION:** The **original wallet license** must be provided to HSO for photocopying within ten (10) days after receipt of the initial license. HSO will print a confirmation of renewal from the Medical Board's website for the Resident/Fellow file subsequently.

**APPLICATION PACKETS FOR MEDICAL LICENSE are available from:**

- LLUMC's HSO
- The Medical Board of California website at [www.mbc.ca.gov](http://www.mbc.ca.gov)
- The Medical Board of California  
2005 Evergreen Street, Suite 1200  
Sacramento CA 95815.
- The Osteopathic Medical Board of California website at [www.ombc.ca.gov](http://www.ombc.ca.gov)
- The Osteopathic Medical Board of California  
1300 National Drive, Suite 250  
Sacramento CA 95834-1991.

Assistance with the application process, verification of LLUMC training, and mailing of the California Medical License application is available at no cost to LLUMC Residents. Questions concerning licensure may be referred to HSO (909) 558-8131.

# COMPENSATION AND BENEFITS

NOTE: All requirements, including personnel paperwork, Social Security Card, Visa/Employment Authorization, if applicable, physical examination/TB tests, CPR certification(s), medical license/registration, etc. must be completed and documented with HSO before compensation and benefits will be activated.

Information contained in this section pertains to Residents paid by Loma Linda University Medical Center. Residents not paid by LLUMC should contact their pay source for specific information concerning salary and benefits.

**It is your responsibility to keep HSO informed of your CURRENT HOME ADDRESS, MAILING ADDRESS, PHONE NUMBER, and DEPENDENT CHANGES.**

## **COMPENSATION**

Effective July 2009, compensation is paid according to appointment level as listed below on a biweekly basis:

<b><u>LEVEL</u></b>	<b><u>BIWEEKLY</u></b>	<b><u>ANNUAL</u></b>
PGY-1	\$1,810.40	\$47,063.00
PGY-2	\$1,878.40	\$48,828.00
PGY-3	\$1,948.80	\$50,659.00
PGY-4	\$2,023.20	\$52,599.00
PGY-5	\$2,097.60	\$54,530.00
PGY-6	\$2,176.00	\$56,574.00
PGY-7	\$2,672.80	\$69,500.00
PGY-8	\$2,672.80	\$69,500.00

## **PAYROLL CHECKS**

Residents are paid on a biweekly basis. LLUMC pay period begins every other Sunday morning at 12:01 am. Payroll checks may be transferred electronically (direct deposited) to accounts at institutions that are members of the Automated Clearing House (ACH) OR may be mailed to the Resident's last known home mailing address on Friday after the end of the pay period.

A completed "Automatic Direct Deposit Authorization" form and a Voided Check may be submitted to HSO or the Payroll Office. It takes two pay periods for direct deposit to be accomplished. Request forms are available in HSO or Payroll Office. Information regarding which banks may be accessed by Direct Deposit from LLUMC is available from the Payroll Office (Ext. 44334).

## **PAYROLL DEDUCTIONS (Payroll Office Ext. 44334)**

There are three main categories of payroll deduction. They are legislated deductions, court ordered deductions and voluntary deductions.

- Legislated deductions are made until the maximum year-to-date amount required by law

has been deducted. The paycheck stub indicates current and year-to-date legislated deductions. Legislated deductions include: Social Security (FICA), Federal Income Tax (FIT), State Income Tax (SIT), and State Disability Insurance (SDI). The Medical Center will comply with all required deductions.

- Court ordered deductions, also called garnishment deductions, are made as required by court action when the Medical Center is served with a garnishment or writ of execution.
- Voluntary deductions, such as credit unions or charitable contributions are made available by the Medical Center for the sake of convenience to personnel. Voluntary deductions are made only at the written request of personnel.

### **PAYROLL ADVANCE**

A payroll advance, for up to 65% of gross wages for hours already worked, may be made in the event of an emergency. Such an advance will be deducted from the next paycheck. Cash advances are limited to no more than one in any calendar year. Contact HSO, Ext. 88131, to arrange for a payroll cash advance.

### **ON-CALL MEAL TICKETS**

Two \$6 on-call meal tickets are provided for Residents who are required to take overnight in-house call; one meal ticket is provided for Residents scheduled for 12-hour on-call shifts. Meal tickets are available from the residency program office for the service Resident is rotating on. Meal tickets are not eligible for discounts at the various cafeterias.

### **HEALTH PLAN (Risk Management Ext. 44386)**

All Residents are eligible for coverage under the **LLUMC Residents Health Plan** during the term of this AGREEMENT. This Plan is a self-insured, employer-sponsored health care benefit plan; it is not an insurance program. The Plan provides comprehensive coverage for hospitalization, outpatient medical services, ambulance, prescription drugs, dental services, optical services and counseling.

Coverage is available for Resident, Resident's spouse and/or dependent children. Monthly premiums are automatically deducted from the first paycheck of each month. In order to receive any coverage under the plan, Physician must complete an enrollment form and submit the form to the HSO. ***Any changes in family or eligibility status (such as change in marital status, new children, unemployed spouse, etc.) must be reported within 30 days of the change in eligibility status.***

Coverage under the Plan is effective on the first day of attendance at Orientation, or on the effective date of the training agreement, providing appropriate enrollment forms have been completed, signed and submitted to the HSO.

Physician shall pay all hospital or medical expenses and co-payments not covered by the Plan whether the care is provided at LLUMC or elsewhere. Health Plan Documents are available at Risk Management and/or HSO. After enrollment, the Department of Risk Management will furnish Physician with a Health Plan identification card.

Details regarding changes in eligibility, deductibles, medical benefits, conditions, etc. are contained in the Residents Health Plan booklet. Questions regarding coverage should be referred to Risk Management (Ext. 44386).

### **HEALTH PLAN CONTINUATION (Risk Management Ext. 44386)**

An option to continue health coverage under the Resident Health Plan is available if you are no longer eligible because of termination from the training program. This provision is for those

who have no other coverage. Under qualifying events, the maximum continuation period is 18 months. For complete information regarding continuation of coverage or other qualifying events, conditions and premiums, contact Risk Management (Ext.44386).

### **DISABILITY COVERAGE**

State Disability Insurance (SDI) is available for eligible Residents in the event of hospitalization, outpatient surgery, or illness lasting over one week. A Resident who qualifies for Workers' Compensation temporary disability or receives State Disability Insurance (SDI) benefits is considered to be on approved disability leave. During approved disability leave, eligibility continues for certain benefits including health coverage. FMLA and CFRA shall run concurrently with State Disability benefits. Full information concerning FMLA and CFRA is available on the LLUMC VIP Page under Policies and Procedures, LLUMC Policy I-69, Legislated Leaves

LLUMC requires that eligible personnel apply for SDI if a covered event occurs. A SDI claim form must be completed and submitted to the State promptly to obtain SDI payments and avoid delay in payment. Salary is made up between SDI payments and available sick leave until sick leave is exhausted or SDI time limits are exhausted.

For information concerning eligibility and application for benefits, contact Human Resource Management - Donna Phillips, ext. 45661 or Kiesha Smith, ext. 87862.

House Staff Office must be notified if a Resident is off work for any of these reasons.

### **GROUP DISABILITY PLAN** (I-800-628-2861)

A guarantee issue, group disability income plan is provided for Residents at LLUMC expense. Details of the plan will be provided at Orientation or at the start of training. Questions concerning the long-term group disability coverage may be referred to David Washkowiak at Western Physicians Financial and Insurance Services, Inc. at 1 (800) 628-2861 Claim forms are available in HSO.

### **LIFE INSURANCE**

A \$100,000 group term life insurance policy is provided at LLUMC expense.

### **PROFESSIONAL LIABILITY COVERAGE (MALPRACTICE)**

LLUMC provides professional liability coverage to Residents enrolled in the graduate medical education program through the Loma Linda University Adventist Health Sciences Center ("LLUAHSC") self-insured professional liability program. This coverage is provided to any Resident while engaged in activities at LLUMC or any other LLUAHSC Affiliated Institutions, provided the activities are within the capacity, course and scope of duties of a Resident and have prior authorization through LLUMC and departmental administration. This professional liability program does not cover any other activities.

### **LEAVE ALLOWANCES – POLICY GMEC-21**

Refer to this policy for information and requirements concerning days off, paid leave, sick leave, funeral leave, jury duty, maternity and paternity leave.

### **INJURY ON DUTY- WORKERS' COMPENSATION**

LLUMC requires that a "Report of Accident" form and an "Employee's Claim for Workers' Compensation Benefits" form be completed promptly any time there is a work-related illness or injury, including needle sticks or infectious disease exposure occurring while on duty. Even if an "injury" seems insignificant it must be documented. This applies to injuries

sustained at the VA Hospital in Loma Linda as well.

- **Injuries or illness sustained by an employee while on duty** shall be reported immediately to the supervisor/department head - contact HSO immediately (Ext. 88131 during the day, Monday-Friday) to have the paperwork completed. During evening hours or weekends the forms can be completed by a Nurse Manager or by ED personnel. This must be done regardless of whether or not medical care is needed, so that there is a record of the injury.

Medical care for work-related illness or injuries is provided by the Occupational Medicine Clinic (Ext. 66222), located in Suite 106B at the Professional Plaza on Barton Road (shuttle is available at the front of LLUMC), or the Emergency Department after hours. Completed forms noted above must be presented to Occupational Health Clinic to obtain medical care.

- **Life-threatening injuries** are treated in the Emergency Department. The injured person should be taken directly to the Emergency Department and have someone call HSO, Ext. 88131 and someone will come there to complete the necessary paperwork.
- **Needle Sticks** are treated in the Emergency Department. Take the completed "Report of Accident" and "Employee's Claim for Workers' Compensation Benefits" forms to the Emergency Department. Emergency Department staff will provide instructions.

Payment or reimbursement through Workers' Compensation is contingent upon prompt reporting of the above information. Additional information concerning Workers' Compensation will be presented at Orientation. Contact Risk Management (Ext. 44389) for questions concerning Workers' Compensation.

### **EMPLOYEE ASSISTANCE PROGRAM (LLEAP) 558-6050 or EXT. 66050**

The Loma Linda Employee Assistance Program (LLEAP) is dedicated to providing eligible employees with professional and caring assessment and treatment for a variety of personal, family and work-related issues. The professional, confidential evaluations available through employee assistance have been known to rescue jobs, save lives, and revitalize family relationships. The services of the LLEAP are available on a voluntary basis, as well as on a referral basis, for issues that may be affecting work performance. Implementation of corrective action shall be accompanied with an offer of assistance through the LLEAP. Call 558-6050 for information or appointments.

Implementation of corrective action **may** accompany an offer of assistance through LLEAP. Information shared with a clinician at LLEAP is confidential with the exception of matters, which fall under mandatory reporting laws. The clinician will answer any questions regarding confidentiality. In the event of referral to LLEAP for work-related problems, LLEAP will not release information to the employer without prior written consent from you.

### **WHITE COATS**

Three white coats are issued by HSO at the beginning of training, provided required documentation is completed and submitted to HSO. Replacement coats must be purchased at the expense of Resident.

Residents continuing into the PGY-4 year at LLUMC after completion of three years of continuous training at LLUMC will be issued a request form to complete and submit to HSO for an additional three new white coats at the start of the PGY-4 year. Failure to submit the

appropriate request form will result in delay.

### **SCRUBS**

Scrubs are provided through vending machines located in the Medical Center. Access to the scrub vending machines is by use of the I.D. Badge with a specific bar code attached that identifies the Resident. The Resident must complete a Request Form for the bar code that must be placed on the I.D. Badge.

### **DO NOT PUT ANYTHING OTHER THAN SCRUBS IN THE SCRUB VENDING MACHINE!**

Items submitted are photographed and can be traced to YOUR bar code – submitting other than scrubs into the vending machine may result in disciplinary action.

### **TUITION BENEFIT**

A full-time benefit-eligible Physician shall be eligible for a maximum of 8 units (credit hours) of reimbursement for undergraduate or graduate college tuition during any calendar year, at the current prevailing Loma Linda University per unit rate of tuition or the accredited educational institution per unit rate of tuition, whichever is less within the guidelines of Medical Center Policy K-24 “Education Tuition Benefit and Employee Financial Assistance”.

### **DISCOUNT CARDS**

Discount cards for many Southern California attractions are available through the Human Resource Management Department (HRMD) and Student Services (ext. 44510). For further information, contact the Employee Benefits Section of HRMD (Ext. 83126)

### **COMMUNITY BLOOD PLAN**

Residents who donate one unit of blood, plasma, platelets, or granulocytes to the *Loma Linda University Medical Center Blood Club Reserve Fund* shall be considered a member for one year, effective from the date of the last donation. Benefit-eligible employees who are members of the Club shall be provided the following benefits:

- Coverage of blood recruitment fees for donor, spouse and dependent children, and a complimentary meal ticket per donation to be used at any LLUAHSC Cafeteria.
- Blood Drives are held at LLUMC on the 1<sup>st</sup> and 3<sup>rd</sup> Monday or every month unless Monday is a holiday, in which case the Blood Drive is held on Tuesday.

**After three donations are made in one twelve month period a maximum of eight hours will be added to the paid leave bank.** The authorization for an additional day of leave must be submitted to the HSO.

Blood donations may be made at the San Bernardino & Riverside Counties Bloodmobile, which is available at LLUMC on the 1st and 3rd Monday of each month or at Life Stream. Blood donated away from LLUMC should be donated in the LLUMC Blood Club's name for credit toward the leave hours.

### **PHOTOCOPYING**

Residents are allowed the privilege of obtaining a limited number of photocopies per training agreement year (prorated for Residents who are in the program less than one year). PGY-1: 150 copies; PGY-2: 200 copies; PGY-3 to PGY-8: 250 copies. This benefit must be used during each specific training agreement period and may not be carried over from one year to another year. Any copies over the limit cost \$.10 per copy.

Copies may be made in the Jesse Medical Library and Information Center or in HSO. If done in HSO, copies must be made by HSO personnel, and must be requested by the Resident on

a timely basis. Copies may not be made for one Resident and charged to another Resident. Charges will not be accepted from other departments, including the University Library.

### **DRAYSON CENTER (Ext. 44975)**

Residents and their dependents are entitled to use the DRAYSON Center's athletic facilities, located at 25040 Stewart Street in Loma Linda free of charge. The LLUMC ID Badge must be presented for enrollment at Drayson. Call Ext. 44975 for specific information.

### **CHILDREN'S CENTER (Ext. 44568)**

The Loma Linda Children's Center operated by the Loma Linda University Church of Seventh-day Adventists and the Southeastern California Conference provides child-care facilities and nursery school Monday through Friday. This service is provided to Medical Center staff on a space-available basis. Specific questions and information concerning rates may be directed to the Children's Center at 25228 Shepardson Drive, Loma Linda, CA 92354 or by phone at (909) 558-4568.

### **CHILD ADOPTION BENEFIT**

The Medical Center has a child adoption benefit for benefit-eligible employees. Please refer to Policy K-34 "Child Adoption Benefit" located on the VIP Page on LLUMC's Intranet under References (Policies and Procedures). Employee Benefits staff may be contacted for details at Ext. 44399 for information.

### **FLEXIBLE SPENDING ACCOUNT**

A Flexible Spending Account (FSA) program is available to all Residents. The FSA allows monthly deductions of pre-tax income into a personal account, which may be used to reimburse them for certain health care and dependent care expenses.

Additional information and forms will be available at Orientation or may be obtained from the Employee Benefits section in the Human Resource Management Department in the University Arts Building (Ext. 45267).

### **TAX-DEFERRED ANNUITY**

Tax-deferred annuities, which are a combination savings/retirement plan whereby taxes are deferred until the funds are withdrawn, are available to Residents who wish to participate. In many cases, participation in such plans will lower the tax base. Contact Employee Benefits (Ext. 44339) for more information.

### **CREDIT UNION**

The La Loma Employees Federal Credit Union is available to all Residents on LLUMC's payroll. Payroll deduction is available for deposit to Credit Union. Call (909) 796-0593 for additional information.

# AFFILIATE INSTITUTIONS

LLUMC has major affiliations with the following facilities:

**ARROWHEAD REGIONAL MEDICAL CENTER ("ARMC")** [(909) 387-8111] is a 315-bed general acute hospital. Report to your department upon arrival. Residents in Dermatology, General Surgery, Oral Surgery, Orthopaedic Surgery, Plastic Surgery, Rheumatology, and Urology rotate on services at this facility. ARMC is located at 400 N. Pepper Avenue, Colton, CA 92324.

**KAISER FOUNDATION HOSPITAL ("Kaiser")** [(909) 427-5000] is a 479-bed general acute hospital. Report to Hospital Administration (first floor) for orientation information BEFORE reporting to your assigned service. Residents in Family Practice, OB-GYN, Pediatrics, Plastic Surgery, and Preventive Medicine rotate at Kaiser. Kaiser is located at 9961 Sierra Avenue, Fontana, CA 92335.

**RIVERSIDE COUNTY REGIONAL MEDICAL CENTER ("RCRMC")** [(909) 486-4000] is a 364-bed hospital. Residents in Emergency Medicine, General Surgery, Internal Medicine, Ophthalmology, Oral Surgery, Otolaryngology and Plastic Surgery rotate at RCRMC. RCRMC is located at 26520 Cactus Avenue, Moreno Valley, CA 92555. Residents should check in at the GME Office prior to beginning rotation at RCRMC.

**JERRY L. PETTIS MEMORIAL VETERANS AFFAIRS MEDICAL CENTER ("the VA")** [(909) 583-6850 or 7 + 4 digit phone # from LLUMC] is a 224-bed general hospital. Dr. John Byrne is Associate Vice-President for Medical Affairs for Education. Report to assigned Service office for a "WOC Letter". This must be done in order to have malpractice coverage regardless of the length of rotation. Residents in Cardiology, Dermatology, Family Practice, G.I., General Surgery, Internal Medicine, Neurology, Ophthalmology, Orthopaedic Surgery, Otolaryngology, Pathology, Physical Medicine & Rehabilitation, Plastic Surgery, Preventive Medicine, Psychiatry, Pulmonary, Radiology, Rheumatology, and Urology rotate at the VA Hospital. The VA Hospital is located at 11201 Benton Street, Loma Linda, CA.

Please see "**VA LOMA LINDA HEALTHCARE SYSTEM MEDICAL RESIDENT GUIDE**" on next page.

**VA LOMA LINDA  
HEALTHCARE SYSTEM**

**MEDICAL**

**RESIDENT GUIDE**

**Prepared by VA Loma Linda**  
**VAMC**  
*July 2007*

**WELCOME TO THE "VA!"** The VA Loma Linda Healthcare System is an integral part of your residency program. The information in this guide will assist you in making the most of your residency experience here. The Associate Chief of Staff for Education (ACOS/E) (Room 2A07) is available to you. Call extension 6004 or 6850 if you need help. Additional information about the Department of Veterans Affairs is at: <http://vaww.va.gov/oaa/orientation/default.asp>

**WHO WE ARE:** The VA Loma Linda Healthcare System consists of the Jerry L. Pettis Memorial VAMC and five community clinics located in Corona, Palm Desert, Sun City, Upland and Victorville. The VA Loma Linda HCS is one of 5 systems in the VA Desert Pacific Healthcare Network.

**OUR MISSION:** To serve the healthcare needs of America's veterans with dignity and compassion.

**OUR VISION:** To be the preferred healthcare provider for veterans by exceeding their expectations and being recognized for quality care, innovation, and value.

**OUR VALUES:**  Trust  Respect  Excellence  Commitment  Compassion (TRECC)

**IDENTIFICATION:** The Loma Linda University Medical Center (LLUMC) ID Badge and the physician name pin must be worn at all times while in the VA Medical Center so that patients and staff know who you are. It also will protect you from embarrassing challenges by VA staff as to your right to be on the premises. **You must sign on the Computerized Patient Record System (CPRS) everyday that you are assigned to the VA in order to record your attendance.**

**UNIFORM:** A long white coat with the resident physician's ID attached over the left pocket is standard attire while on duty. "Scrubs" are optional wear when on night-call and post-call. Men are expected to wear ties. No tennis shoes or jeans.

**PARKING:** Parking is on a space-available basis. *During regular hours from 7 AM to 2:30 PM, Monday through Friday,* parking is limited to those spaces without an orange curb, the perimeter road and on the outskirts of VA property. **ORANGE CURB**  
LLUMC HOUSE STAFF MANUAL 2009-2010 Page 45

**SPACES ARE FOR PATIENTS ONLY.** Please respect our patients' need for these spaces **AND AVOID A TICKET AND APPEARANCE BEFORE A FEDERAL MAGISTRATE.** During holidays, on weekends and after regular hours, parking in all lots is permissible except in designated disabled parking spaces.

**ACCESS TO BUILDING:** The Medical Center may be accessed through entrances in the front, southwest, south, east and north entrances. Before 6 AM and after 5 PM, weekends and holidays, only the north entrance is open.

**INFORMATICS/LIBRARY SERVICES:** The main library, on the 2<sup>nd</sup> floor, 2 Southeast, is open from 7:30 AM to 4:30 PM, Monday through Friday. It is closed on holidays and weekends. MEDLINE, UpToDate, OVID, books and several other evidence-based resources are available on the intranet, through the "TOOLS" menu in the CPRS. From any VA computer, access to Ovid (<http://gateway.ovid.com/>) UpToDate (<http://www.uptodate.com/>) and the New England Journal of Medicine (<http://content.nejm.org/>) is available. OVID provides full text journal articles and textbook access.

**FOOD SERVICE:** The Cafeteria is located on the second floor and is open from 7AM to 4PM Monday through Friday and Saturday from 8:30AM to 3:30PM. It is not open on holidays or weekends.

- Breakfast is from 7AM to 10:15AM
- Lunch is from 10:15AM to 2:00PM
- Sandwiches and snacks from 2PM to 4PM

The Canteen (Retail Store) next to the Cafeteria carries snacks, cookies, candy bars, bottled drinks, incidentals and some clothing. It is open weekdays from 8:30AM to 4PM. Vending machines are located next to the cafeteria, on the first floor by the Urgent Care/ER and in some other clinic areas.

**MEAL TICKETS:** Two meal tickets are available for each resident for each night on call. Tickets are issued only for those residents who must stay overnight in the hospital for on-call duties. Tickets must be used within the month of the issue date.

**SLEEPING ROOMS:** Resident and student sleeping rooms are located on 4SW (Medicine Service) and 3NW (Surgical and Behavior Medicine Services). Room 4B-33 is for the ICU-CCU resident on call. Access to sleeping rooms is by keycards, which can be obtained from ACOS/E's office, room 4B-53. A \$20 deposit is required. The call rooms and lounges are reserved for the exclusive use of residents and students. Please report anyone other than residents/students who are accessing these areas to the ACOS/E.

**LOUNGE:** A lounge is located in each of the call room suites on 3NW and 4SW. The lounges are for residents and medical students only. **Residents and students are responsible for the clean up and monitoring of food stored in the refrigerator.** Food will be disposed of if left for more than a few days. A limited amount of food is available in this room for **on-call students and residents.** Out of courtesy for your fellow students and residents, please partake of this food **only if you are on-call** and have no access to other food after hours. Respect your colleagues by **keeping the lounges clean!**

**POLICE/SECURITY SERVICES:** Offices are near the Emergency Room, 1B03. Telephone extensions:

<b>Emergencies:</b>	<b>1444</b>
<b>Non-Emergencies</b>	<b>2135</b>

Notify police immediately in case of suspicious circumstances, abandoned boxes or packages or loss of personal property. **Police escort is available for staff leaving at night. Requests must be made at least 10 minutes before departure.**

**Emergencies/Fire Safety**

<b>Code Blue</b>	<b>3333</b>
<b>Fire Safety - Code Red</b>	<b>2222 or Operator</b>
<b>Electrical/Utility Failure</b>	<b>3036/2184</b>
<b>Blood/Body Fluid Spill</b>	<b>3036/Pager 7135</b>
<b>Adverse Drug Reaction</b>	<b>1588</b>
<b>Chemical Spills</b>	<b>1510</b>

**RACE:** Rescue, Alarm, Confine, Extinguish  
**PASS:** Pull, Aim, Squeeze, Sweep (Fire extinguisher)

**NEWS MEDIA:** Annie Tuttle, Public Affairs Officer, at extension 6193 or pager 7084, manages all release of information to the news media regarding patients or employees. The telephone operator can contact her after hours or on weekends or

holidays.

**CONFIDENTIALITY:** All patient and staff information must be held in strict confidence. Conversations about patients should be avoided in elevators, the cafeteria and in other public places. Questions concerning specific release of information issues must be referred to the Health Information Management Section at extension 6031, Room 1A01A. If in doubt, ask your senior resident or attending physician. **Notes on cards or any papers which contain patient identifiers must be secure at all times and/or destroyed by placing them in the gray shredding boxes located throughout the wards and clinics and NOT in Blue recycle bins or trash cans.**

**INFECTION CONTROL:** Hand washing is "the single most important means of preventing the spread of infection" in the Medical Center. **Wash your hands each time you enter and leave patient rooms.** Universal Precautions are practiced throughout this facility when caring for patients. Appropriate protection must be worn when it can be reasonably expected that you might have contact with blood or other potentially infectious materials, mucous membranes, non-intact skin or any body fluids. Gowns, gloves, masks and eye protection are provided on patient care units for your protection. The use of TB respirators requires fit testing by Safety. Contact nursing personnel for access to protective items. The proper management of patients with transmissible infections is addressed in the Infection Control Manual.

**NEEDLE STICKS/INJURY:** Report immediately to Occupational /Employee Health on 2SW. For treatment of needle sticks or other injury after hours, please report to the Emergency Room. An injury report must be completed promptly and signed by your immediate supervisor.

<b>Occupational/Employee Health</b>	<b>Ext. 2059</b>
<b>Emergency Room</b>	<b>Ext. 2114</b>

**COMPUTERIZED PATIENT RECORD SYSTEM (CPRS):** CPRS is a powerful, user-friendly program that will assist you in providing excellent patient care through its accessibility, legibility, data organization, remote data access, ordering capabilities and reminders for preventive and chronic disease care. Computer access rights will be addressed at orientation and you will receive additional training at the VAMC. Please remember the following:

- You must obtain your own access and verify codes.
- Always sign off CPRS and the hospital computer network when you leave a workstation.
- Never share computer codes
- Keep all patient information confidential.

Additionally, use CPRS responsibly:

- **Minimize "cut and paste" practices and avoid plagiarizing**
- Update problem lists
- Use the "History and Physical Examination" template for all inpatient H&P's
- Resolve Clinical Reminders
- Use appropriate note titles for your area of assignment. The note title format is: service/section/note title (e.g., Med/Inpt/progress note or Surg/Inpt/Daily Visit Note)
- Use "D/C Summ" template for all discharges.
- Medical records completion is monitored and delinquencies forwarded to LLUMC for suspension.

Do not access the Internet for personal use (home e-mail) or blocked sites (social networking sites, media downloads, etc.). Your Internet activities **will be monitored** and violations will result in disciplinary actions. If you need additional help, please call Information Technology Service at extension 4767.

**RESIDENT WORK HOURS:** Resident work hours will be monitored. Residents are expected to comply with this effort and report their actual hours. Residents must not work more than 80 hours per week averaged over 4 weeks; 30 hours consecutively; or be on call any more often than every third night. Residents must have 1 day off out of 7 average over 4 weeks and should have at least 10 hours between shifts. If you have concerns about work hours, contact the ACOS/E office.

**RESIDENT SUPERVISION:** All patient encounters must be supervised including outpatient clinic visits, ER and inpatient consultations, inpatient admissions and daily visits. **Residents must document supervision on every encounter in the progress note and identify an attending physician co-signer.** Appropriate documentation is: "The patient was seen and discussed with Dr. Jones who agrees with the assessment and plan as stated." Examples of insufficient documentation

are: "Discussed with attending" or "D/W with Dr. Jones." Templates are available in the "Notes" tab in CPRS, in the "Templates" under "Shared Templates" Residents may co-sign inpatient notes but should write an addendum or write in the students note: "I have read and edited the above medical student note and I have independently performed my own examination of the patient. I agree with the assessment and plans as they now stand".

**CLINICAL PRACTICE GUIDELINES:** Over the past several years, VHA has implemented an extensive preventive and chronic disease care program. VA performance exceeds the private sector in most areas of preventive health and chronic disease care. Clinical reminders based on these evidence-based guidelines are found in the CPRS "Notes" tab in the lower left corner. After opening the "Reminders" drawer, dialogs will pop up with options to assist you with disease-specific and appropriate preventive measures for the patient including ordering tests, prescribing medication and patient education. All of the items that you select will be included in your note automatically.

**PATIENT SATISFACTION:** Patient satisfaction is critical to the success of patient care. In caring for veterans, please remember to be courteous and timely, involve patients in their care and provide clear instructions.

**TELEPHONE USAGE:** Medical Center extensions have four numbers and can be dialed from any phone in the Medical Center. Outside lines, but not long distance, can be dialed from some telephones by first dialing '9.' LLUMC extensions can be connected by first dialing '7' and then the five number extension. Faculty Medical Office can be connected by dialing '7' then '2,' followed by the four-digit number. For Loma Linda Community Hospital dial '7', then '6' and the extension. To contact a physician, a patient or another medical center that requires long distance, call the Medical Center operator; give your name, the need for the call and the long distance number.

**PAGING:** To initiate a page:

- Dial: 1717
- After beep, dial: PAGER #
- After 3 beeps, dial: EXTENSION #  
FOLLOWED BY \* KEY (\*indicates a VA number)

**Medical Center Phone Directory:** Our intranet site contains a telephone directory:  
<http://vaww.lom.med.va.gov>

END  
VA LOMA LINDA HEALTHCARE SYSTEM  
RESIDENT GUIDE

# LOMA LINDA UNIVERSITY SCHOOL OF MEDICINE EDUCATIONAL OUTCOMES

2008

## YEAR 3

### ***Knowledge***

1. Identify sufficient clinical science knowledge needed for each of the core disciplines;
2. Analyze which laboratory tests and radiographic procedures are indicated for diagnosing common medical problems and how the appropriate and inappropriate use of these tests impact the quantity and cost of medical care;
3. Identify the role and importance of clinical and basic science research and investigation in the care of patients;
4. Critically analyze and evaluate the source and validity of new basic and clinical science information that applies to the practice of medicine;
5. Explore career options through an elective rotation;

### ***Skills***

1. Demonstrate the ability to obtain an accurate and comprehensive patient-centered medical history from patients and their families that contains all aspects of the history, including issues related to age, gender, cultural and social setting, emotional concerns and spirituality;
2. Demonstrate ability to retrieve, filter, analyze, manage, utilize biomedical information and other patient specific information to solve problems and make patient-care decisions or provide education;
3. Perform an organized, accurate and appropriately sensitive physical exam, including the screening physical exam, the disease-specific physical exam and a preventive medicine oriented physical exam;
4. Demonstrate proficiency for the clinical activities and technical procedures that are listed in the School of Medicine skills log and departmental skills logs;
5. Apply knowledge about relieving pain and principles of end-of-life care to supervised patient care activities in the hospital, outpatient and hospice settings;
6. Apply the scientific method in establishing the causation of disease and efficacy of traditional and non-traditional (complimentary and alternative) therapies;
7. Demonstrate ability to integrate psycho-social and spiritual care with the physical care of patients;
8. Demonstrate diagnostic skills necessary for each of the required and elective clerkship rotations;

9. Demonstrate ability to report and use the information obtained from the medical history, physical examination, laboratory and radiographic studies to establish an appropriate differential diagnosis and formulate a treatment plan that expresses relative risks and benefits;
10. Demonstrate willingness to serve as a member of the health care team and effectively utilize the contribution that each member of the team can make to a patient's recovery;
11. Demonstrate oral, written and technological communication skills necessary for effective interactions with peers, faculty, patients and their families and other health care providers;
12. Demonstrate the ability to incorporate cultural and religious beliefs and practices when addressing medical problems, concerns and anxieties of patients from diverse cultures and socioeconomic backgrounds, including differing approaches to health, wellness and human suffering;
13. Demonstrate respectful and ethical conduct in interactions with peers, faculty and patients;

***Behaviors/Values/Attitudes***

1. Respect differing values, cultures and beliefs, including diversity in sexual orientation, gender, age, race, ethnicity and spirituality of patients, peers, faculty and other health care providers;
2. Accept the responsibility to engage in lifelong learning to stay abreast of relevant scientific advances;
3. Exhibit the ability to work independently and the self-motivation necessary to become a lifelong learner;
4. Accept responsibility for upholding ethical and professional standards in one's own life and among one's colleagues;
5. Demonstrate a commitment to the following fundamental values: compassion, integrity, excellence, freedom, justice, purity/self control, humility;

<b>YEAR 4</b>
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***Knowledge***

1. Evaluate prevailing practices and best practices and identify steps necessary to close the gap;
2. Explain how racial and ethnic disparities can influence health care delivery and quality;
3. Critically analyze and evaluate the source and validity of new basic and clinical science information that applies to the practice of medicine;
4. Identify sufficient clinical and basic science knowledge needed for each of the core disciplines;

***Skills***

1. Demonstrate sufficient diagnostic skills for each of the required and elective rotations;
2. Demonstrate the ability to obtain an accurate and comprehensive sub-intern level patient centered medical history from patients and their families that contains all aspects of the history, including issues related to age, gender, cultural and social setting, emotional concerns and spirituality';

3. Demonstrate ability to retrieve, filter, analyze, manage, utilize biomedical information and other patient specific information to solve problems and make patient-care decisions or provide education.
4. Perform an organized, accurate and appropriately sensitive physical exam, including the screening physical exam, the disease-specific physical exam and a preventive medicine oriented physical exam;
5. Demonstrate proficiency in the clinical activities and technical procedures that are listed in the School of Medicine skills log and departmental skills logs;
6. Demonstrate skills necessary to care for patients with emergent and life-threatening conditions, including those that may be the result of bioterrorism;
7. Demonstrate the ability to apply principles of epidemiology and health maintenance to the care of patients in the hospital and ambulatory settings;
8. Apply knowledge about relieving pain and principles of end-of-life care to supervised patient care activities in the hospital, outpatient and hospice settings;
9. Apply the scientific method in establishing the causation of disease and efficacy of traditional and non-traditional (complimentary and alternative) therapies;
10. Demonstrate ability to integrate psycho-social and spiritual care with the physical care of patients;
11. Demonstrate ability to determine which laboratory tests and radiographic procedures are indicated for diagnosing common medical problems and how these tests impact the cost of medical care;
12. Demonstrate ability to report and use the information obtained from the medical history, physical examination, laboratory and radiographic studies to establish an appropriate differential diagnosis and formulate a treatment plan that expresses relative risks and benefits;
13. Demonstrate ability to discern the indications for performing a comprehensive medical interview and physical examination from a more focused medical interview and disease-specific exam;
14. Demonstrate oral, written and technological communication skills necessary for effective interactions with peers, faculty, patients and their families and other health care providers;
15. Demonstrate the ability to incorporate cultural and religious beliefs and practices when addressing medical problems, concerns and anxieties of patients from diverse cultures and socioeconomic backgrounds, including differing approaches to health, wellness and human suffering;
16. Demonstrate willingness to serve as a member of the health care team and effectively utilize the contribution that each member of the team can make to a patient's recovery;
17. Facilitate the use of patients' assets in coping with illness, including their health-affirming spiritual and religious resources:

***Behavior/Value/Attitude***

1. Respect differing values, cultures and beliefs, including diversity in sexual orientation, gender, age, race, ethnicity and spirituality of patients peers, faculty and other health care providers;
2. Recognize and accept one's limitations in knowledge and clinical skills and commit to continuous improvement;
3. Exhibit the ability to work independently and the self-motivation necessary to become a life long learner;
4. Accept responsibility for upholding ethical and professional standards in one's own life and among one's colleagues;
5. Demonstrate a commitment to the following fundamental values: compassion, integrity, excellence, freedom, justice, purity/self-control, humility.

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