



**Office of Graduate Medical Education**

**GRADUATE MEDICAL EDUCATION COMMITTEE POLICY NO. 15**

- A. SUBJECT: Trainees Rotating Off Service
- B: EFFECTIVE DATE: July 16, 2014 (R)
- C: POLICY: Policy on UVA Graduate Medical Trainees performing rotations in other program's services

Definitions:

Primary Program – Residency Program in which graduate medical trainee is based.

Hosting Program – Residency Program in which graduate medical trainee from another UVA program rotates.

Off Service Rotator – Graduate medical trainee within the UVA system rotating to another clinical service other than his/her primary/home program.

A: PROCEDURE:

The University of Virginia Medical Center seeks to provide the appropriate educational experiences for graduate medical trainees. This often involves graduate medical trainees rotating from their primary program to another program within the medical center. In order to formalize this interaction, the following guidelines govern this interaction :)

1. If any post-graduate training requires a rotation to another Department other than the graduate medical trainee's primary Department, program directors from both the primary and host residency programs must agree to this collaboration.
2. The host program must distribute level specific goals and objectives of the rotation to the off service rotator and the primary program's Program Director along with any other educational materials
3. A rotation schedule must be made in advance allowing the two services involved to make the needed adjustments to ACGME/RRC regulations as well as the individual needs of each Department. It is suggested that rotation schedules are distributed to the other services as early as April, but no later than May.
4. If a hosting program is no longer able to accommodate graduate medical trainees other than their own, a minimum of 6 months must be given to the primary residency to make the necessary schedule/rotation adjustments.
5. Host program will determine availability of leave on its rotations and will be communicated between Program Directors. Ideally, off service rotators will submit requests for leave at the time yearly schedules are made, however, a request for leave must be made at least 60 calendar days prior to the start of the rotation in which the

leave is being requested. Requests for leave will be submitted by the off service rotator to the Chief Resident or other individual who is responsible for that program's scheduling.

6. In programs where off-service rotators are scheduled on a regular basis and/or where the presence of those trainees is required to meet the patient care needs of the hosting program, any changes in the complement of those trainees must be communicated by the primary program to the host program well in advance of the deadline for NRMP or similar match programs are declared (in general, February) to allow the host program adequate time for any necessary adjustments and coverage.
7. In the event an off service trainee has continuity clinic and/or mandatory didactic session during his/her rotation with the host program, the host Department in which the trainee is rotating must be informed of this at the time of initial agreement to host the trainee. Upon completion of the continuity clinic and/or mandatory didactic program, the off service trainee must return or at a minimum check with the hosting Department to see if he or she needs to return for clinical duties.
8. Host Program Directors and/or program faculty are responsible for the evaluation of the off service trainee on their service. However, it is the responsibility of the primary residency program to distribute the evaluation to the host program in a timely manner (suggested end of rotation basis).
9. The off service trainee will follow the duty hour requirements of the host program.

Reviewed/Approved GMEC: October 3, 2007, January 13, 2011

Reviewed/Approved Policy Subcommittee: April 12, 2011

Reviewed/Approved GMEC: April 20, 2011

Reviewed/Approved GMEC: July 16, 2014