#### **CHIEF RESIDENTS**

Julianne Awrey, M.D.

Pager – 816-1156 julianne.awrey@ucdmc.ucdavis.edu

John Coburn, M.D.

Pager – 816-2317 john.coburn@ucdmc.ucdavis.edu

A.J. Pilgrim, M.D.

Pager – 816-2831 ashley.pilgrim@ucdmc.ucdavis.edu

Chiefs

Pager – 816-7259 ER Chief Residents (type in Lotus Notes "To:" line)

The three chief residents will rotate responsibilities throughout the year. The pager number listed for "Chiefs" should be called for urgent situations where you need the chief in charge. The Chief resident will always carry a pager, 24 hours a day. If you are unable to reach the Chief Resident, contact the Residency Program Manager, the Program Director, the Associate Program Director or Assistant Program Director.

#### RESIDENCY PROGRAM DIRECTOR

David Barnes, M.D. david.barnes@ucdmc.ucdavis.edu

Direct line: 734-0405 Pager: 816-0341

Cell: 916-803-3388

#### RESIDENCY PROGRAM ASSOCIATE DIRECTOR

Katren Tyler, M.D. katren.tyler@ucdmc.ucdavis.edu

Direct line: 734-1591 Pager: 816-6678

Cell: 214-5692

### **RESIDENCY PROGRAM ASSISTANT DIRECTOR**

Aimee Moulin, M.D. aimee.moulin@ucdmc.ucdavis.edu

Direct line: 734-1591 Pager: 816-8722

Cell: 549-0998

# RESIDENCY PROGRAM ASSISTANT DIRECTOR - SOUTH KAISER

Marjan Siadat, M.D. marjansiadat7@gmail.com

Cell: 773-425-2414

# **EDUCATION MANAGER**

Nina Walker ucdavis.edu nina.walker@ucdmc.ucdavis.edu

Direct line: 734-8571 Cell: 916-215-1040

### RESIDENCY PROGRAM COORDINATOR

Tywa Zildzic tywa.zildzic@ucdmc.ucdavis.edu

Direct line: 734-8570

### MEDICAL STUDENT AND FELLOWSHIP COORDINATOR

Janis Burse janis.burse@ucdmc.ucdavis.edu

Direct line: 734-5016

#### **IN A NUTSHELL:**

#### RESIDENT RESEARCH PROJECT

The UCD EMR requires a research project by each resident as a requirement for graduation. EMR-I residents need only consider an area of particular interest. Generally speaking, research project activities are not begun until the EMR-II year. You will hear more about this requirement from Dr. Deb Diercks. Contact any of the research faculty during your EMR-1 year for ideas/mentorship.

### PROGRAM EVALUATION COMMITTEE

The Program Evaluation Committee is chaired by the Program Director. The committee assists in the overall guidance and management of the residency program. The PEC is responsible for submitting annual evaluations of residents, advising the Program Director on curricular changes, making recommendations regarding disciplinary action of residents, and appropriateness of advancement to the next level of graduation. The membership of the PEC is public information.

# **CLINICAL COMPETENCY COMMITTEE (CCC)**

The Clinical Competency Committee is chaired by the Associate Program Director and meets bi-annually. The purpose of the CCC is to evaluate resident performance on Emergency Medicine Milestones and to submit recommendations to the Program Director for reporting to the RRC. Membership on the CCC is public, but the meetings are closed/confidential.

#### **MEDICAL RECORDS COMPLETION**

It is the responsibility of each house officer, in all specialties, to maintain accurate and timely medical records completion. This requirement will be with you for your entire professional life, and it is suggested that you develop good habits early in your career. If you have charts to complete or verbal orders to sign, it will show up in your in-basket when you sign onto the EMR. **Please check your in-basket every day**. On occasion, a visit to Medical Records is required. It is important to avoid suspension due to overdue incomplete medical records. Repeated, or lengthy, suspensions go on your permanent record at the California State Medical Board and may require reporting to hospitals and other agencies at a future date.

You are not covered by malpractice insurance and cannot work until you have visited Medical Records, or taken care of your E-sign, if you do appear on the suspension list. If you appear on this list, your Resident Medical Staff privileges are suspended immediately – you may not practice medicine at this point. The Education Manager or Program Coordinator will contact you via pager, text page and/or cell phone, and instruct you to remove yourself from any patient contact. You must do so immediately upon learning of your suspension.

You must complete all requirements and contact the Education Manager or Program Coordinator to get your privileges reinstated. It also requires an excessive amount of administrative time to notify residents regarding impending suspensions, etc.

### **VERBAL ORDERS**

Joint Commission regulations state that verbal orders <u>must</u> be signed within 48 hrs. As noted above, every time you access the EMR, a notice will be displayed at the top right corner of the screen if you have a verbal order to sign. **Please be very attentive to your verbal orders as the department is charged** 

**\$10.00** for every one that goes over 48 hours. Unsigned verbal orders can and will lead to suspension of privileges, if they are not taken care of. The Education Manager or Program Coordinator will notify you via Lotus Notes email, text page and/or cell phone, if you appear on the unsigned verbal order list.

You can find the directions in the CRC website.

https://ucdcrc.ucdmc.ucdavis.edu/servlet/CRC/maptrigger.html

# **SEXUAL HARASSMENT**

The University of California and UCDHS are extremely sensitive to the issues of sexual harassment and are committed to a working atmosphere that is free of all forms of harassment, exploitation or intimidation, including sexual. The residency program takes concerns relating to potential sexual harassment very seriously. The university, health system, department and residency program have a zero-tolerance policy concerning harassment. Additionally, the university provides a hotline, (916) 734-2255. All calls are strictly confidential. Please do not hesitate to relate any concerns regarding harassment to the Education Manager, your Faculty Advisor, Program Director, Department Chair, or others as appropriate. This applies to both on-service and off-service rotations.

### **GRIEVANCES/MISTREATMENT**

Take any problems with rotations, attitude issues, schedules, problems with other housestaff, attendings, nursing (or if you just feel dumped on) directly to your Chief Resident or the Residency Program Director. Your Education Manager is a good listener, too, and is there to help you through difficult times. Confidential, professional, and free counseling is offered to all staff, including housestaff, through the Employee Assistance Program (ASAP) at 734-ASAP.

UCDHS has implemented a formal mistreatment policy that is accessible by all faculty, staff and students through a key website:

http:\\intranet\\ucdmc.ucdavis.edu/policies/hosp/2917.html

The mistreatment policy was designed to operate along with other policies which seek to eliminate or prevent discrimination, sexual harassment and violence in the workplace. If you have a concern about mistreatment that you feel may be going on in our work environment, you may contact Stephen Chilcott of Human Relations, Staff Mistreatment Officer. Reports are confidential, but are not anonymous. Safeguards against retaliation are in place. You can contact the Mistreatment Office at 734-2362.

# **GOALS AND OBJECTIVES and PROCEDURES AND EXPERIENCES**

You will be given procedures and experiences and goals and objectives for each of your rotations at the beginning of the year. These are also kept in "Clinical Rotation Summary" notebooks that can be found in the **Education Manager's Office**, **Program Director's Office and the Housestaff Lounge**. They are also found on our resident-driven website: http://ucdavisemergencymed.org/administrative/

Additionally, you will be asked to evaluate each rotation after it has been completed. This will be done through E\*Value, <a href="https://www.e-value.net/index.cfm">https://www.e-value.net/index.cfm</a>. These evaluations are an ACGME REQUIREMENT. Your opinions are taken very seriously in making decisions to improve the residency. Your timely completion of these evaluations are expected and appreciated. On certain rotations, you will receive evaluations for attendings that you did not work with. You are given the opportunity to "suspend" these evaluations.

### **CRC WEBSITE**

The health system has an intranet website, Clinical Resources Center (CRC). We (the residency program) have transitioned to our resident-driven website for our documents. However, the GME office and other specialties continue to use the CRC website for important information and documents you may need some time during your residency. Please be sure to visit the site so you will be familiar with the information available to you from GME, and others departments.

The address is: <a href="http://ecrc.ucdmc.ucdavis.edu/c/">http://ecrc.ucdmc.ucdavis.edu/c/</a> (if you just type CRC in the internet address space it will take you to the site). It is also available as a button in the EMR. You must log-in using your Kerberos log-in and password, if you do not know this, please contact IT at 4-4357. DO NOT GIVE YOUR KERBEROS LOGIN OR PASSWORD TO ANYONE OUTSIDE THE DEPARTMENT.

# **SWITCHING OF ROTATION DAYS**

All shift schedule changes for either the UCDMC or Kaiser ED's must be made in writing via e-mail and approved in advance by the EM Chief Residents, Associate Program Director, or the Program Director. The only exception to this requirement is for the UCD ED during the PGY-1 year. These must be approved in writing in advance by the Intern Rotation Coordinator, Dr. Aimee Moulin. In general, schedule changes are discouraged. Switching of shifts requires administrative resources, so please keep schedule changes to a minimum. When you email Dr. Moulin concerning a schedule change, please cc the Intern Schedule Coordinator, Janis Burse, to keep her in the loop. Janis' email is: <a href="mailto:janis.burse@ucdmc.ucdavis.edu">janis.burse@ucdmc.ucdavis.edu</a>. Janis plays an integral role in the intern scheduling.

In addition, no resident can violate the RRC requirements that mandate a 12-hour maximum shift length, at least one day off per week and, on average, no more than 60 hours clinical, or 72 hours total (including conferences) per week on ED rotations.

### **CROSS COVERAGE**

The EM residency program has an agreement to provide backup coverage on selected rotations. **This is** one of the reasons why the Chief Resident <u>must</u> be informed of any illness-related absences or other schedule/shift changes.

#### **VACATION**

You are given four weeks off each year and this time can ONLY BE TAKEN while you are on Kaiser South ED rotations, unless otherwise approved by the Program Director. These vacations must be arranged with the Chief Residents well ahead of your rotation time. In addition to the four weeks (192 hours) you will have time off between Block 13 and Block 1 at the end of the year.

You are required to notify the Education Manager or Program Coordinator, preferably by email, when you will be away for three days or more. This is also important so we can keep you off the medical record suspension list.

# **ABSENCES**

#### **EXCUSED ABSENCES ARE:**

- 1) 12 Sick Days (8 hours earned per month)
- 2) VACATION (4 weeks recorded in 8-hour increments to total of 192 hours)

### ABSENCES FROM HOSPITAL PATIENT SERVICES

The Emergency Medicine Chief Residents need to know when you will be absent from your service, regardless of whether is it an ED rotation, or off-service rotation. You will also be responsible for notifying your attending physician or chief resident on your shift. You also need to let your Education Manager or Residency Program Coordinator know of these absences so that we can keep an accurate account of your accumulated sick leave or vacation days for record-keeping purposes. It will also allow us to let Medical Records know that you will be away so you don't make the weekly 48-hr suspension list for non-completion of medical records.

#### **CREDENTIALS**

The Department of Emergency Medicine strongly supports hospital policies that require current credentials and up-to-date copies are maintained in your housestaff file. Please help us by keeping these items current:

MEDICAL SCHOOL DIPLOMA
ACLS CERTIFICATE
ATLS CERTIFICATE
PALS CERTIFICATE
CPR
EMPLOYEE HEALTH REQUIREMENTS
LICENSE
DEA

We also recommend that you maintain current copies of these documents in your possession. Medical licensure is not normally required in the State of California for first-year postgraduates (PGY1). However, in order to meet certain service needs, housestaff beyond the PGY1 level are required to apply for a California Medical License as soon as they are qualified to do so. Graduate Medical Education pays for your first license. They hold a license fair in the spring with staff from the Medical Board, someone from Medical Illustration to take pictures, a fingerprint person and a notary. You are strongly encouraged to attend this licensing fair. Otherwise, you could bear some or all of the cost to obtain your medical license.

It is Department policy, as well as hospital policy, that all PGY-2's are licensed by the end of their 24<sup>th</sup> month of training. However, this now takes place at the end of your PGY-1 year due to the hospital paying for the license. There is a stiff fine/penalty for both the hospital and our program if any EMR is not licensed July 1 of the PGY-III year, and you will not be allowed to do any rotations until the license has been acquired. Forms may be downloaded from the California Medical Board website: <a href="http://www.medbd.ca.gov/">http://www.medbd.ca.gov/</a>. Further information may be obtained by calling the Board of Medical Quality Assurance Phone: 916-263-2499.

Your medical license must be renewed every two years on the last day of your birthday month. You will be required to pay for the renewal of your medical license prior to completing residency, if your license expires prior to the last day of your residency.

#### **SUBSTANCE ABUSE**

Residents with legal offenses related to substance use (e.g., DUIs) who apply for an initial California medical license are at high risk of not receiving an unrestricted license. The Board (MBC) places the burden on the applicant to prove that they are not posing a risk to patient safety. In our limited experience since the sunsetting of the MBC Diversion program, one resident applying for an initial license after sustaining a DUI one year prior was approved for only a probationary license, with a harsh monitoring program. All costs incurred through this monitoring are the **resident's responsibility**. Also, this poses a problem due to numerous schedule disruptions for the resident, every time they have an appointment, which could add up to several hours weekly, e.g., individual, group sessions, urine testing.

For residents who already have a license, the burden is on MBC to prove they are not safe doctors, therefore they may be in a better situation in regards to their license. The resident still has to abide by a strict monitoring contract however, in our experience so far they have been able to renew their license and continue to practice.

In all situations, it is best to meet directly with the Program Director and the Chair of the Medical Staff Well-being Committee immediately, as soon as any questions arise. That is Dr. Peter Yellowlees, cell: (916) 833-1874, pager: (916) 816-1930.

#### **MEDICAL RECORDS**

It is the responsibility of each house officer to complete their medical record responsibilities in a timely fashion. The Program Coordinator will contact each individual <u>once</u> when an impending suspension notice is received. Please note that multiple suspensions for medical records can result in a blemished record that can interfere with subsequent job applications, etc.

#### **SALARY**

You are an employee of the hospital (UCDHS) and any specific questions you may have about benefits, salary, etc. should be directed to the UCDHS Human Resources personnel office at 734-3416. Contact your Program Manager for questions or persistent problems that are not resolved there.

## THE HOUSESTAFF LOUNGE

Your lounge is located in Room 2204 within the PSSB Emergency Medicine Suite and is the official Housestaff office. *Please pick up your mail routinely!!* You have a key to the housestaff lounge. The janitorial services will ONLY PICK UP THE TRASH. Other housekeeping duties are your responsibility. This room is not a bicycle rack or storage area. Please check with parking services for places to safely leave your bicycle.

## <u>MAIL</u>

Your mail will be distributed daily. Please pick it up several times a week, as there frequently are memos from the Residency Director, Department Chair and/or the Education Manager, Residency Program Coordinator, etc. Copies of phone messages will be put in this mailbox also. Please do not send personal mail to this mail slot. We simply do not have the staff to distribute personal mail.

### **LIBRARY**

The Department of Emergency Medicine maintains a select library of reference texts and journal subscriptions. The residency program has a subscription to EMRAP and Emergency Medical Abstracts lecture tapes/CDs. You will also receive a personal password for Internet access to EMA. These are available to all residents and are located in the Housestaff Lounge. The UCD Medical Library is located in the Medical Education Building, and the main library is located on campus in Davis. The library here will assist you in obtaining articles, etc. from the campus library.

### **CAFETERIA AND MEAL CARDS**

The cafeteria is located on the first floor of the Pavilion. A meal card is provided to cover some meals for the "on-call" or lengthy shifts that you work. If you have questions regarding your meal card, please contact Kris Singh in the GME office at 4-7696. *Please make yourself aware of the hospital policy*.

### **SLEEP ROOMS**

On selected inpatient rotations, sleep rooms will be provided for you. The residency sleep rooms are located in the basement of the Pavilion. Your badge/cardkey will give you access to the rooms. There is an exercise area and a lounge/tv area in the sleep room area. On ICU rotations, generally the sleep rooms are adjacent to the ICU itself. There is also a couch in our housestaff lounge that can be used for sleeping whenever needed.

### **WHITE COATS**

You may order your white coats for your internship year from laundry facilities in the basement of the hospital, if you have not done so already. There is a hamper inside the window to deposit dirty laundry. You may pick up your clean coat and leave your dirty laundry any time. **Don't drop your coats at any other place in the hospital and expect to ever see them again**. *Please do not leave them, or blankets, in the housestaff lounge, as laundry service is not provided.* 

#### **MISCELLANEOUS**

<u>SCRUBS</u> – The department will provide you with three sets of scrubs, with embroidered tops. During orientation, you will be measured for the scrubs. You are strongly encouraged to wear your Emergency Medicine scrubs on all rotations.

<u>IPHONE</u> – You may access your Lotus Notes via iPhone. Please contact the Program Coordinator for instructions.

TRAVEL & EXPENSES – Unless you have a strong objection, you should give the Program Coordinator your Kerberos password (she has your login), in order to handle the submission of your expenses when applicable. The Program Coordinator will also set up your MyTravel for our finance staff to be delegates to prepare expense reports for you. You will find this especially helpful when you travel to SAEM (Intern year) and ACEP (R3 year). All receipts for approved department-related expenses should be given or emailed to the Program Coordinator.

<u>KEEP ADDRESSES AND PHONE NUMBERS UPDATED</u> – Please notify the Education Manager or Program Coordinator if your home address or phone number changes.

<u>LOTUS NOTES</u> – It is imperative (and required) that you read your Lotus Notes daily. It's the most convenient and guaranteed way of the staff, faculty and other residents to reach you with important information or task reminders. **Under no circumstances are you allowed to forward your Lotus Notes to a non-secured email address**, regardless of the convenience. You are subject to fines up to \$30,000 PER OCCURRENCE if you are caught forwarding your email. The Compliance Department frequently, routinely and randomly runs checks on the status of your Lotus Notes. We stress again, DO NOT forward your Lotus Notes to another email address.