



Jacobs School of Medicine and Biomedical Sciences

Office of Graduate Medical Education

University at Buffalo

JUNE 2017

Table of Contents

Acknowledgements	2
Recruitment	3
Match Week through NRMP	8
Orientation	12
Updates in RUS (Resident Update System)	14
Benefits and Leave	18
Alphabet Soup - Common Acronyms/Abbreviations Used in GME	21
Glossary of Terms	24
Program Administrator Timeline	36

Acknowledgements

Our thanks to the Training Program Administrator (TPA) Handbook Work Group for volunteering to participate in this endeavor. I was proud to be involved in the very thoughtful discussions that took place in deciding the topics that are essential to the success of Training Program Administrators at the University at Buffalo. We are grateful to you for sharing your expertise in creating this resource to be used by current and future TPAs at the University at Buffalo.

- ❖ Melissa Beckman, Internal Medicine - Catholic Health System
- ❖ Emily Caldarelli, Hematology/Oncology
- ❖ Barbara Hails, Radiation Oncology
- ❖ Christopher Maloney, Anesthesiology & Anesthesiology Fellowships
- ❖ Yvonne Osterman, Pediatrics
- ❖ Carrie Racsumberger, OB/GYN Sisters Hospital
- ❖ Carol Regan, Psychiatry
- ❖ Kimberly Tuberdye, Anesthesiology & Anesthesiology Fellowships

And for their assistance in formatting and paginating the document:

- ❖ Lori Esene, Pediatric Gastroenterology
- ❖ Pamela McFeely, Pediatric Critical Care

We wish to convey our special thanks to Trish Craft, Administrative Director at Vanderbilt Medical Center for sharing the Vanderbilt Program Coordinator Manual with us and allowing us to use it as a springboard to create our own handbook.

We are very grateful for and appreciative of your collegial spirit!

Sharon Sullivan
Director, GME Operations & Project Management
University at Buffalo

Procedure for:	Recruitment
Purpose:	To obtain the best residents for the program
Timeline:	ALL YEAR with Interviews between October - February for main match programs. Fellowships may have different cycles.
Established Date:	March 8, 2016
Date of Revision:	March 2017
Website:	www.nrmp.aamc.org www.aamc.org/services/eras/programs www.aamc.org/services/gmetrack
Login:	
Password:	
Additional Information:	Numerous deadlines are associated with Recruitment - keep all information on the above websites up-to-date.

RECRUITMENT

Overview

The Recruitment Process is one of the most important functions of all Residency Programs. The goal is to recruit the best possible candidates who will excel in residency training and as practicing physicians. The Annual Plan through the Graduate Medical Education Office determines how many positions will be offered in the National Resident Matching Program® (NRMP) also known as The Match. The Accreditation Council of Graduate Medical Education establishes the maximum approved positions for the program (which may be higher than what is allowed through the Annual Plan). In addition, each program has certain criteria applicants must meet to be granted an interview. Positions can be very competitive. At this time, the majority of residency programs receive many more applications than there are positions available. The challenge for any program is determining which applicants to interview and rank for The Match (see explanation below). There are several organizations that are part of the recruitment process. They include:

- a. Accreditation Council of Graduate Medical Education (ACGME - www.acgme.org/acgmeweb)

National Accreditation body for all Residency Training Programs. All requirements for residency training are established and monitored through this organization and programs

must ensure that these requirements are being met. Programs must be accredited by the ACGME in order to participate in the National Resident Matching Program®.

b. National Resident Matching Program (NRMP - www.nrmp.aamc.org) - “The Match”

The National Resident Matching Program® is a private, not-for-profit corporation established in 1952 to provide a uniform date of appointment to positions in graduate medical education (GME). Each year, the NRMP conducts The Match that is designed to optimize the rank ordered choices of students and program directors. The NRMP uses a mathematical algorithm to place applicants into residency and fellowship positions. The algorithm is “applicant-proposing”, meaning the preferences expressed on the rank order lists submitted by applicants, not programs, initiate placement into residency training. Each applicant and program is asked to create a rank order list in order of their *true* preferences. In the third week of March, the results of The Match are announced.

The NRMP is not an application processing service; rather, it provides an impartial venue for matching applicants' and programs' preferences for each other. Programs should be aware of special match situations, e.g., couples matching.

Any program that participates in The Match must register and attempt to fill all of its positions through The Match. This does not apply to fellowship programs.

The process begins with an attempt to match an applicant to the program most preferred on that applicant's rank order list. If the applicant cannot be matched to that first choice program, an attempt is made to place the applicant into the second choice program, and so on, until the applicant obtains a tentative match or all the applicant's choices on the ROL have been exhausted. During Match Week, unmatched and partially matched applicants may participate in the Supplemental Offer and Acceptance Program (SOAP) to try to obtain an unfilled residency positions. Programs participating in SOAP MUST accept applications only through ERAS and MUST offer unfilled positions only through SOAP until 5:00 p.m. ET on Thursday of Match Week.

c. Electronic Residency Application Service (ERAS - www.aamc.org/services/eras/programs)

The Electronic Residency Application Service is provided through the Association of American Medical Colleges (AAMC). ERAS is a service that transmits residency applications, letters of recommendation, Dean's letters, transcripts, and other supporting credentials from applicants and medical schools to residency programs via the Internet. It was designed simply to assist you with managing your residency application process.

d. Educational Commission for Foreign Medical Graduates (ECFMG - www.ecfm.org)

Through its program of certification, ECFMG assesses the readiness of graduates of foreign medical schools to enter residency or fellowship programs in the United States that are accredited by the Accreditation Council for Graduate Medical Education (ACGME). Typically, before most training programs consider international graduates for any position, they require that international graduates either hold a valid ECFMG certificate or will be eligible to obtain one prior to the start of training. UB primary residencies only accept J-1 visas.

However, some fellowships will sponsor H1-B visas. Information about the requirements of both types of visas may be found at

http://www.smbs.buffalo.edu/GME/Directors_Forms.php

e. **GME Track** (www.aamc.org/services/gmetrack)

Sample Residency Recruitment Tasks

Tasks	Assigned To	When to Complete	✓ completed items
Review and update website	Faculty, Residents and TPA	July prior to start of interview season	
Decide on interview dates	Program Directors	September	
Contact hotel with dates for availability	TPA or Assistant TPA	Once dates are decided	
Book conference rooms for meetings, interviews and meals	TPA or Assistant TPA	September	
Contact restaurant venues to arrange candidate dinners; submit for payment	TPA or Assistant TPA	As needed	
Contact caterers to arrange candidate lunches according to schedule; submit for payment	TPA or Assistant TPA	As needed	
Notify faculty of dates and request interview availability	TPA or Assistant TPA	First week in October, then again in November and December	
Use ERAS to review applications	Program Directors	When ERAS opens in September	
Invite and confirm interview dates	TPA or Assistant TPA	As soon as possible in ERAS	
Send dinner details to candidates	TPA or Assistant TPA	Two weeks in advance of interview	
Hold recruitment meeting - discuss meals, materials, ideas and responsibilities	Faculty, Residents and TPA	August through October	
Candidate File Folder- Agree on contents (Interview Schedule for Candidate, program and institution information, etc.)	TPA or Assistant TPA	Secure materials for information packets. Order Materials as necessary in August	

Create interview schedules and send to faculty with candidate applications	TPA or Assistant TPA	Prior to interview day
Set up lunch according to schedule; break down	TPA or Assistant TPA	Each afternoon according to schedule
Greet candidates	TPA or Assistant TPA or both	Each interview date
Manage faculty interviews	TPA or Assistant TPA or both	Each interview date
Conduct hospital tour	Residents	According to schedule
Farewell to candidates	TPA or Assistant TPA or both	Each interview date

GME Track is a resident database and tracking system. GME Track contains the National GME Census, which is jointly conducted by the Association of American Medical Colleges and the American Medical Association. The data entered in the Program Survey of the National GME Census are used to update FREIDA Online® (Fellowship and Residency Electronic Interactive Database Access - <http://www.ama-assn.org/ama/pub/education-careers/graduate-medical-education/freida-online.page>). Each program is responsible for updating their information once per year. This is a service operated by the American Medical Association (AMA) providing a search engine to research and compare residency training program options.

f. **Residency Program Website (UB - www.smbs.buffalo.edu/GME/Residents_Programs.php)**

Be sure that your website is current and up-to-date and can provide prospective applicants with helpful information in regards to education and training, faculty, research, patient care, etc.

g. **Residency Program Selection Committee**

Meet regularly to establish criteria for eligibility, agree on parameters for interviewing and the interview day set-up, assess qualifications of candidates as they are interviewed, and to determine the rank order list to be finalized by the Program Director. Be sure applications are properly screened to avoid interviewing candidates who have exceeded the [12-week rule](#).

h. **Interviewing Don'ts**

As part of preparing for interviews, make sure all faculty interviewers know what types of questions and topics or behaviors are illegal, inappropriate, and/or prohibited by NRMP. At the start of each interview season, all interviewers should see the list below as well as read the NRMP Communication Code of Conduct: <http://www.nrmp.org/code-of-conduct/>.

Interviewers must NOT discuss or ask questions regarding:

- Age
- Marital Status

- Religion or Creed
- Gender
- Sexual Orientation
- Immigration Status
- Veteran Status
- Disability (it *is* permissible to ask about the applicant's ability to perform the duties and responsibilities described)
- Family Status (it *is* permissible to ask whether there are any activities, commitments, or responsibilities which might prevent the meeting of work schedule/attendance requirements, but only if asked of all applicants - both male and female)
- National Origin (it is permissible to ask about an applicant's ability to read, write, or speak English or another language when required for a specific job)



Jacobs School of Medicine and Biomedical Sciences

Office of Graduate Medical Education

University at Buffalo

Procedure for:	Match Week through NRMP
Purpose:	Preparing for candidates that matched
Timeline:	Third week of March for Main Residency Match Varies for Fellowships - see NRMP website for details
Established Date	March 8, 2016
Revised Date	March 6, 2017
Website:	www.nrmp.org
Login:	
Password:	
Additional Information:	

National Resident Matching Program (NRMP):

In July each year, every residency training program must determine if they will be “All In” or “All Out” of the NRMP. If your residency program elects to be “All In”, all candidates must be entered into your NRMP Rank Order List (ROL) and matched into your program through NRMP. You may NOT offer contracts to candidates outside of the match. Some fellowships, dually-accredited programs and military appointees to civilian programs do not have to adhere to the “All In” policy. Requests for exceptions must be submitted in writing to investigations@nrmp.org.

Access the NRMP website at www.nrmp.org

March:

Main Match Week - (usually mid-March.) Be aware that communicating with applicants outside of the prescribed dates will result in a match violation which may have dire consequences for the program and institution.

For the Main Residency match calendar, click on the link <http://www.nrmp.org/residency/main-match-events/>

- Click on “print version”
 - Click on the “Detailed Match Week and SOAP schedule” link

For the fellowship match calendar, click on the link <http://www.nrmp.org/wp-content/uploads/2015/03/SMS-Master-Calendar.pdf>

To learn more about participating fellowships, click on the link <http://www.nrmp.org/participating-fellowships/>

Things to consider about the match and Supplemental Offer and Acceptance Program (SOAP):

- Training Program Administrators should be aware of special match situations such as couples' match, armed forces commitments, and visa requirements.
- Print the Match schedule from the NRMP website
- Contact the GME office regarding any foreign medical graduates you may have.

Things to consider about the interview process:

- Have a system set up for screening applicants obtained through ERAS;
- Change voice mail and include instructions for applicants;

Contracts:

All contracts for incoming trainees must be requested through the Resident Update System (RUS). <https://resident.med.buffalo.edu/rus/>

Offer Letter Example:

April 1, 20xx

Dear Incoming Resident or Fellow (Name):

Welcome to the University at Buffalo XX Training Program. Please find attached employment packet with complete instructions on how to fill-out the documents and your contract. I have also included a self-addressed stamped envelope (or reply to this email- **NOTE! DO NOT EMAIL Social Security Card information**) to help expedite the return of these materials which are due back by **DATE (determined by GME)**. **NOTE: Your program may request incoming residents to respond earlier so that you are able to meet the GME deadline.**

In addition to this packet, I will also need copies of the following documents from you:

- Medical School Diploma
- USMLE Transcripts (Step 2 if it was not uploaded to ERAS)
- ECFMG Certificate (if applicable)
- Passport (if you have one)
- Driver's License
- Social Security Card (**DO NOT EMAIL!**)

If you have any questions or concerns regarding the above, please contact me and I will do everything I can to facilitate this process.

Sincerely,

New Resident/Fellow Checklist

Resident/Fellow Name: _____

UB Program Name: _____

PGY Level _____

Is this appointment for a Prelim Year? Yes No

If Yes, for what specialty? _____

ALL NEW RESIDENT/FELLOW PACKETS MUST INCLUDE THE FOLLOWING DOCUMENTATION:

PLEASE CHECK BOX NEXT TO EACH INCLUDED ITEM AND ARRANGE THEM IN ORDER SPECIFIED BELOW WITH THIS FORM ON TOP

INFORMATION TO BE SUBMITTED TO OGME:

Program GME

- Form I-9 – Section 1 COMPLETED by resident/fellow; Section 2 & 3 left blank
- I-9 Proof – Copy of documents as indicated on I-9 Form ONLY
 - Non-U.S. citizens must include DS-2019 or I-797, I-94 record, Passport as applicable
- Copy of Social Security Card
- Federal and State Income Tax forms COMPLETED and SIGNED by resident/fellow
- Medical School Diploma – with translation and translator certification, if not in English
- ECFMG Certificate – for ALL International Graduates
- Signed Medical School Release Form (U.S. Medical School graduates only)
- Completed UB, ERAS or PASS application
- Employment contract (& Wage Theft Form) signed by resident/fellow and Program Director
- Confirmation of Compliance with “12 Week Rule” – for IMGs only
- Direct Deposit Form (if applicable)

The documents listed above, where applicable, have been received and reviewed and copies are on file in the Office of Graduate Medical Education.

GME Human Resources

Date

INFORMATION TO BE ON FILE IN PROGRAM DIRECTOR’S OFFICE:

Medical/ Dental School Transcript

Clinical Clerkships

Prior Post-Graduate Experience (if applicable)

College Diploma/Transcript for MD Degree

The documents listed above, where applicable, have been received, and reviewed and copies are on file in my office.

Program Director

Program

Date



Procedure for:	Orientation
Purpose:	On-board residents & fellows to training programs.
Timeline:	Incoming Residents' Week (IRW): <ul style="list-style-type: none">• For PGY1 residents• Week of the 3rd Monday in June July 1 st : For PGY2 and Fellows
Established Date	March 8, 2016
Revised Date	March 6, 2017
Website:	RUS: https://resident.med.buffalo.edu/resweb/ (for contracts) E*Value: www.e-value.net (for tutorials)
Login:	
Password:	
Additional Information:	Numerous deadlines are associated with Orientation activities. Pay close attention to the weekly GME emails (GMED).

Resident Orientations and Incoming Resident Week (IRW) & July 1:

All residents new to University at Buffalo sponsored programs must attend a mandatory resident orientation prior to the start of their training program. All PGY1 residents attend the Incoming Resident Week Orientation held beginning the third Monday of June. Residents at the PGY2 and most fellows attend a one-day orientation program on July 1st. Check with GME Human Resources regarding program start date questions.

New residents or fellows starting off-cycle must participate in a separate orientation arranged through the Office of Graduate Medical Education before the start date of their training program. All residents must have a Health Physical Exam arranged through UB Resident Employee Health prior to start of work as a resident. Incoming residents and fellows should NOT receive a physical from their personal physician.

Program-Based Orientation:

Most training programs will also have a program orientation. Check with your Program Director regarding your program's orientation agenda which you may play a large role in organizing. Some orientation programs must also allow time for residents to take advanced certification courses.

Hospital-Based Orientation:

Hospital Computer Systems and Required Training: Residents will be assigned to attend hospital-based orientation according to the location of their first rotation. Subsequent training for rotations to hospitals throughout the year must be arranged 30 days in advance of the upcoming rotation. Hospital contact information can be accessed on the GME Webpage under the Affiliated Hospitals tab. On-boarding activities and requirements at each hospital may include:

- Patient Safety, Medical/Legal Liability
- OSHA and Infection Control
- Parking
- Rotation Check-In, EMR information
- ID Badges



Procedure for:	Updates in RUS (Resident Update System)
Purpose:	Request renewal contracts, enter new resident information (and request contracts), request certificates for graduating residents and notify GME HR of residents going out on disability.
Timeline:	
Established Date:	March 2, 2016
Date of Revision:	March 2, 2017
Website:	https://resident.med.buffalo.edu/rus/
Login:	Program Specific
Password:	Program Specific
Additional Information:	Must use Internet Explorer

Logging In

- Link: <https://resident.med.buffalo.edu/rus/>
- Use Internet Explorer!
- There are two logins for security purposes.
 - First login: If you do not have a UB School of Medicine computer account, your username is: guestrcs. Please email Amanda Schiedel (aschied@buffalo.edu) for the password.
 - Second login: If you can't remember your specific program logins, email Amanda.
- After you log in the first time, update your program's contact information

Primary Contact Name:	<input type="text"/>
Primary Contact Email:	<input type="text"/>
Secondary Contact Name:	<input type="text"/>
Secondary Contact Email:	<input type="text"/>
	edit contact info

Requesting Renewal Contracts for Continuing Residents

- RUS will populate all of your current residents and list the following important information:
 - PGY level
 - Current PGY start/end dates
 - Visa status (if applicable)

TYPE	LAST	FIRST	START	END	PGY	STATUS	PROG	SALARY	HOSP	CURR_Visa
CUR	Doe	John	7/23/2014	7/22/2015	5	Active	SUR	\$0.00	VA/UB	J-1

Will this resident be continuing in this program Yes No

- After each resident, you will click yes or no.

- If yes, ensure that next PGY start date and PGY level is correct. You do not need to do anything for the payline.

Please complete the information for the resident:	Next PGY Start Date: 7/1/2017	PGY: 4	Payline:	Comments:
---	----------------------------------	-----------	----------	-----------

- Complete for each resident that is continuing in the program. If the dates are not correct or there are other changes that need to be made, please contact me.
- Once you update all continuing residents, you must click “save” at the bottom.
- Amanda Schiedel will not receive an automatic notification when contracts are requested, so please send her an email to let her know. She will then approve the contracts and let Jason Crosby know to prepare the contracts. Once Jason has done so, you will receive an email notification that the contracts (and required New York State wage theft forms) are ready to be printed from RUS. They will be in PDF format.

Requesting Certificates for Graduating Residents

- After clicking no for not continuing, you will be asked to pick a reason from a drop down menu and confirm the end date.

Will this resident be continuing in this program Yes No

Please select a status for the resident: ▼

- The majority of graduating residents will have the following status: Complete Training (Leaving UB). If you are unsure of what to pick, please contact Amanda Schiedel and you can discuss the situation.
- If the end date that is automatically populated is not correct, please contact Amanda Schiedel. If someone is graduating early or later than expected, the GME office will need to know the details and ensure the proper process is followed.
- You will want to confirm with your graduating residents how they would like their name presented on their diploma (i.e. middle name or initial) and that it is spelled and capitalized correctly.

Please select a status for the resident:	Complete Training (leaving UB) ▼	Enter End Date:	7/22/2015
Please enter certificate information for the Resident:	Certificate of Residency in Surgery	Resident Name:	Doe, John
		Start Date:	7/23/2012
		End Date:	7/22/2015

- Complete this step for all graduating residents. Again, you must “click” on the bottom in order to submit your request.
- Once you have completed, please let Jennae Howard (jennaeho@buffalo.edu) know as she will prepare and send diploma proofs to you.

Requesting Contracts for New Residents

- If your program participates in the ERAS match, new resident information will be populated into RUS for you from the information we receive from ERAS. You will be

notified when the information is in RUS and you will need to verify and save the new contract requests.

- If your program does not participate with ERAS or you need to manually enter a new resident, scroll to the bottom of the page past the list of residents, click on “Enter or Update a New Resident”.



ENTER OR UPDATE A NEW RESIDENT

- Complete all questions and click Save. If you are unsure of certain questions, please contact GME Human Resources. If you do not have the resident’s SSN at the time you are entering the information, you can leave it blank.
- Again, notify GME Human Resources when all new contracts have been requested for approval and notification to Jason.
- Once you receive both signatures from the trainee and program director, please send the original contract to Amanda Schiedel (aschied@buffalo.edu) to obtain the final signature. She will then send a copy of the executed contract back to your office.

For Entering Changes to Work Status e.g. Disability

- Logging in: Link: <https://resident.med.buffalo.edu/change/>
- Use Internet Explorer!
- If you can’t remember your program logins, email Amanda Schiedel (aschied@buffalo.edu)

You will be prompted to select a person, click on the person you need to change the status of.

The following Screen will appear and you can enter the information accordingly. Then click submit.

If you have any questions you can contact the general GME line at 716-829-2012 and ask for Human Resources.

Do not use this form for information included on the on-line Resident Update System.

Resident Name: Doe, John

Program: Gynecology / Obstetrics - SCH

Pay Line: Sisters Hospital

Change Type:

- Start Disability Leave
- Return From Leave
- Resigned
- Terminated
- Completed Program
- Unpaid Leave
- Other

Effective Date of Change:	<input type="text"/>
Program Contact Person:	<input type="text"/>
Program Contact Email:	<input type="text"/>

Comments:

^
v

Procedures **Benefits and Leave**

for:

Purpose: Information on resident benefits and procedures for work-related injuries and disability leaves

Established March 8, 2016

Date:

Revised March 2017

Date:

Timeline: During orientation, open enrollment, and ongoing

Website: Benefit & Leave Policy:

<http://medicine.buffalo.edu/content/dam/medicine/d/gme/policies/Employee-Benefits-Leave-Policy.pdf>

Navigate to Policies>UMRS/UDRS Benefits and Leave Policy

RUS (Change of Training Status):

<https://residentmed.buffalo.edu/rus>.

Click Change of Training Status

Login:

Password:

Additional GME Human Resources administers/oversees benefit and
Information: leave related issues.

Overview - Benefits & Leave

Residents/Fellows (“Residents”) are employed by University Medical Resident Services, PC (UMRS) or University Dental Resident Services, PC (UDRS). Residents are not employed by the University at Buffalo, practice plans, or the hospitals in which they work. Residents receive compensation according to the academic year’s resident salary schedule. Residents are provided with health and dental insurance at no cost. Additionally, residents receive short-term disability coverage, long term-disability coverage, life insurance, and several optional benefits which may be elected during new resident orientation or open enrollment (annually during the month of June). Additional resident benefits include workers’ compensation coverage, vacation and sick leave,

holidays, bereavement, FMLA leave, paternity leave, a prescription stamp, lab coats, and select university privileges. All benefits are subject to policy and eligibility requirements as determined by UMRS/UDRS and the GME office. The Resident Benefit and Leave Policy can be found here:

<http://medicine.buffalo.edu/content/dam/medicine/d/gme/policies/Employee-Benefits-Leave-Policy.pdf>

All questions regarding resident benefits should be directed to GME Human Resources at 829-2012.

Medical/Dental Benefits:

All residents employed by UMRS or UDRS are provided with health and dental insurance at no cost to the resident for single or family coverage. Coverage for health insurance is effective on the first day of employment. New residents enroll in the health insurance plans during regularly scheduled new resident orientations. Health insurance contracts are in effect from July 1 through June 30 of each year. Residents should contact GME Human Resources for information on benefit coverage and/or electing or making changes to their insurance coverage.

Vacation and Sick Time:

NOTE: If a Residency Review Committee (RRC) or Accreditation Board requires a minimum number of weeks of training per year in conflict with the UMRS/UDRS vacation policy, the policy shall automatically be amended to comply with the requirements of the RRC or Accreditation Board of the program in question.

Subject to the above condition, each resident is entitled to accrue up to twenty (20) days of vacation and twenty (20) days of sick time annually at the rate of 1 and 2/3 days per month. Unused vacation time may not be accumulated from year to year. However, sick time may be accumulated up to a maximum of one hundred twenty (120) days.

Disability Leaves

The Office of Graduate Medical Education Human Resources must be notified when a resident/fellow goes out on a disability leave. Leaves for pregnancy/childbirth are considered disability leaves. Additionally, the GME office should be notified of all FMLA, bereavement, paternity, and/or unpaid leave of absence requests. Leave notification should be made by submitting required leave information through RUS: <http://apps.med.buffalo.edu/change/>.

The office of Graduate Medical Education will provide leave-related forms to the resident for completion. In some situations, the Program Director's written approval of a resident's leave request is required.

NOTE: Accreditation Board or RRC requirements may necessitate an extension of the training

period upon the residents' return to work in order for the resident to qualify for certification. If a leave will result in an extension of training, program directors must notify the resident in writing, with a copy to the Office of GME, outlining the educational ramifications of the leave. A revised employment contract reflecting the necessary extension of the training must be executed upon the residents' return to employment. All contract extensions must be made in the training year in which the leave was taken.

Workers' Compensation:

UMRS and UDRS maintain workers' compensation insurance for the residents and fellows whom they employ. This insurance is for employees who are injured or become ill because of their jobs. Workers' compensation insurance provides for medical care and lost wages if an employee's ability to work is affected due to an on-the-job injury or illness.

Some of the most common on-the-job injuries sustained by UMRS/UDRS residents and fellows include:

- Needle sticks
- Scalpel cuts
- Blood or body fluid exposures
- Puncture wounds

When an on-the-job injury or illness occurs, it is important that the resident report to either the emergency room or employee health office at the hospital in which he is rotating to seek treatment and file an incident report and contact GME Human Resources at 716-829-2012. There is no need to inform the program.

Residents should not use their personal medical insurance coverage to pay for treatment/services. Residents who receive medical bills related to a workers' compensation incident should contact the GME office. After the injured resident has received treatment and completed an incident report, the report will be forwarded to the Office of Graduate Medical Education, so that a workers' compensation claim can be filed on his behalf. The resident will then receive additional information regarding his claim from GME and from UMRS/UDRS' workers' compensation insurance carrier.

Alphabet Soup - Common Acronyms/Abbreviations Used in GME

AMC	Association of American Medical Colleges
ABMS	American Board of Medical Specialties
ACCME	Accreditation Council for Continuing Medical Education
ACGME	Accreditation Council for Graduate Medical Education
ADS	Accreditation Data System (within ACGME)
AHA	American Hospital Association
AHME	Association for Hospital Medical Education
AMA	American Medical Association
AMA-CME	American Medical Association - Council on Medical Education
AMG	American Medical Graduate
AOA	Alpha Omega Alpha
AOA	American Osteopathic Association
APE	Annual Program Evaluation
ATLS	Advanced Trauma Life Support
CBE	Competency-Based Education
CCC	Clinical Competency Committee
CLER	Clinical Learning Environment Review
CMS	Centers for Medicare and Medicaid Services
CODA	Council on Dental Accreditation
DHS	Duty Hour Subcommittee
DIO	Designated Institutional Official
DNV GL	Kaleida Health Accrediting Body. Merger between two entities: (Det Norske Veritas and Germanischer Lloyd)
E*GME	Reimbursement component to E*Value
E*Value	Web-based Residency Management System
ECFMG	Educational Commission for Foreign Medical Graduates
ERAS®	Electronic Residency Application Service
FCVS	Federation Credentials Verification Service
FMG	Foreign Medical Graduate
FREIDA	Fellowship and Residency Interactive Database Access (AMA)
FS	Accreditation Field Staff
FSMB	Federation of State Medical Boards
FTE	Full-Time Equivalent
GHHS	Gold Humanism Honor Society
GME	Graduate Medical Education
GMEC	Graduate Medical Education Committee
HIPAA	Health Insurance Portability and Accountability Act
IMG	International Medical Graduate
IRC	Institutional Review Committee
IRD	Institutional Review Document

JC (formerly JCAHO)	Joint Commission on Accreditation of Healthcare Organizations
LCME	Liaison Committee on Medical Education
NBME	National Board of Medical Examiners
NRMP	National Resident Matching Program
OAP	Outside Annual Plan
OGME	Office of Graduate Medical Education
PALS	Pediatric Advanced Life Support
PC	Program Coordinator
PD	Program Director
PDAC	Program Directors' Advisory Committee
PEC	Program Evaluation Committee
PGY	Post Graduate Year
PLA	Program Letter of Agreement
PQRS	Program Quality Review Subcommittee
R3®	The Registration, Ranking, and Results system
RC or RRC	Review Committee or Residency Review Committee
ROL	Rank Order List
RUS	Resident Update System
SOAP	Supplemental Offer and Acceptance Program
SV	Site Visitor
SSV	Specialist Site Visitor
TPA	Training Program Administrator
TPAC	Training Program Administrators' Committee
UBJSMBS	University at Buffalo Jacobs School of Medicine & Biomedical Sciences
USMLE	United States Medical Licensing Examination

Glossary of Terms

The majority of this glossary is taken from ACGME's Glossary of Terms found here: http://www.acgme.org/acgmeweb/Portals/0/PFAssets/ProgramRequirements/ab_ACGMEglossary.pdf. Reference the Glossary at the above web address for the most up to date information.

Academic Appointment

An appointment to a faculty category (e.g. professor, Associate Professor, Adjunct Clinical Instructor, etc.) of a degree-granting (e.g. BS, BA, MA, MD, DO, PhD, etc.) school, college, or university.

Association of American Medical Colleges (AAMC)

The AAMC is a not-for-profit association representing all 144 accredited U.S. and 17 accredited Canadian medical schools. The Electronic Residency Application Service (ERAS) was developed and is currently overseen by the AAMC.

Accreditation Council for Graduate Medical Education (ACGME)

The ACGME is responsible for the accreditation of post-graduate medical training programs within the United States. Accreditation is accomplished through a peer review process, and is based upon established standards and guidelines.

ACLS

Advanced Cardiac Life Support

Activity

See [Rotation](#). An educational experience of planned activities in selected settings, over a specific time period, developed to meet goals and objectives of the program

Accreditation

A voluntary process of evaluation and review based on published standards and following a prescribed process, performed by a non-governmental agency of peers.

Accreditation Data System (ADS)

The Web ADS is an online service of ACGME that allows authorized program directors of accredited graduated medical education programs to input limited amounts of Program Information data to servers maintained by the ACGME or on its behalf.

Alpha Omega Alpha

A national honor society for medical students, residents, physicians and scientists in the U.S. and Canada.

Annual Plan

The annual process through which Program Directors submit their change in program size or any new program requests for the upcoming academic year on a timetable provided by the Office of Graduate Medical Education (GME). GME works with programs and affiliated hospitals to determine pay line assignments, and the final annual plan is submitted to the GMEC for approval.

Annual Program Evaluation (APE): An ACGME required annual review and evaluation of a program's curriculum focusing on the following: resident performance; faculty development; graduate performance; program quality; and progress on the previous year's action plan(s).

Applicant

An M.B.B.S., M.D. or D.O. invited to interview with a GME program.

Assessment

An ongoing process of gathering and interpreting information about a learner's knowledge, skills, and/or behavior.

ACLS

Advanced Trauma Life Support

BLS

Basic Life Support

Categorical Resident

Also see “Graduate Year 1”. A resident who enters a program with the objective of completing the entire program.

Certification

A process to provide assurance to the public that a certified medical specialist has successfully completed an approved educational program and an evaluation, including an examination process designed to assess the knowledge, experience and skills requisite to the provision of high quality care in a particular specialty.

Chief Resident

Typically, a position in the final year of the residency (e.g., surgery) or in the year after the residency is completed (e.g., internal medicine and pediatrics).

Citation

A finding of a Review Committee that a program or an institution is failing to comply substantially with a particular accreditation standard or ACGME policy or procedure.

Clarifying Information

A Review Committee may request clarifying information that specifies information to be provided, including a due date for the clarifying information.

Clinical

Refers to the practice of medicine in which physicians assess patients (in person or virtually) or populations in order to diagnose, treat, and prevent disease using their expert judgment. It also refers to physicians who contribute to the care of patients by providing clinical decision support and information systems, laboratory, imaging, or related studies.

Clinical Competency Committee

A required body comprised of three or more members of the active teaching faculty who are advisory to the program director and review the progress of all residents in the program on a biannual basis.

Clinical Learning Environment Review (CLER)

The ACGME Clinical Learning Environment Review (CLER) provides the profession and the public a broad view of sponsoring institution’s initiatives to enhance the safety of the learning environment and to determine how residents are engaged in the patient safety and quality improvement activities.

Clinical Responsibility/Workload Limits

Reasonable maximum levels of assigned work for residents/fellows consistent with ensuring both patient safety and a quality educational experience. Such workloads, and their levels of intensity, are specialty-specific and must be thoroughly examined by the RRCs before inclusion in their respective program requirements.

Clinical Supervision

A required faculty activity involving the oversight and direction of patient care activities that are provided by residents/fellows.

Combined Specialty Programs

Programs recognized by two or more separate specialty boards to provide GME in a particular combined specialty. Each combined specialty program is made up of two or three programs, accredited separately by the ACGME at the same institution.

Common Program Requirements

The set of ACGME requirements that apply to all specialties and subspecialties.

Competencies

Specific knowledge, skills, behaviors and attitudes and the appropriate educational experiences required of residents to complete GME programs.

These include patient care, medical knowledge, practice-based learning and improvement, interpersonal and communication skills, professionalism, and systems-based practice.

Complement

The maximum number of residents or fellows approved by a Residency Review Committee per year and/or per program based upon availability of adequate resources.

Compliance

A program's or institution's adherence to a set of prescribed requirements.

Conditional independence

Graded, progressive responsibility for patient care with defined oversight.

Confidential

Information intended to be disclosed only to an authorized person; that an evaluation is deemed confidential does not imply that the source of the evaluation is anonymous.

Consortium

An association of two or more organizations, hospitals, or institutions that have come together to pursue common objectives (e.g., GME).

Continued Accreditation

A status of "Continued Accreditation" is conferred when a Review Committee determines that a program or sponsoring institution has demonstrated substantial compliance with the requirements.

Continuity clinic

Setting for a longitudinal experience in which residents develop a continuous, long-term therapeutic relationship with a panel of patients.

Continuous time on duty

The period that a resident or fellow is in the hospital (or other clinical care setting) continuously, counting the resident's (or fellow's) regular scheduled day, time on call, and the hours a resident (or fellow) remains on duty after the end of the on-call period to transfer the care of patients and for didactic activities.

Core Faculty

Faculty members designated as core faculty in the ACGME WebADS.

Core Program

See [Specialty Program](#).

Designated Institutional Official (DIO)

The individual in a sponsoring institution who has the authority and responsibility for all of the ACGME-accredited GME programs.

Didactic

A kind of systematic instruction by means of planned learning experiences, such as conferences or grand rounds.

Disaster

An event or set of events causing significant alteration to the residency/fellowship experience at one or more residency/fellowship programs.

Duty Hours

Duty hours are defined as all clinical and academic activities related to the program; i.e., patient care (both inpatient and outpatient), administrative duties relative to patient care, the provision

for transfer of patient care, time spent on in-house call, and other scheduled activities, such as conferences. See this link for specifics: [UB GME Duty Hour Policy](#)

ECFMG

Educational Commission for Foreign Medical Graduates. Certification of ECFMG is the standard for evaluating the qualifications of international medical graduates (IMGs) before they enter U.S. graduate medical education. ECFMG certification is also a requirement for IMGs to register for Step 3 of the USMLE exam and to obtain an unrestricted medical license in the United States.

ECFMG Number

The identification number assigned by the Educational Commission for Foreign Medical Graduates (ECFMG) to each international medical graduate physician who receives a certification from ECFMG.

Elective

An educational experience approved for inclusion in the program curriculum and selected by the resident in consultation with the program director.

ERAS®

Electronic Residency Application Service. ERAS® is most commonly used by medical graduates or medical students in their final year of medical school to apply for specialized graduate training in ACGME-accredited residency programs in the US. Many residency and fellowship programs require applicants to apply through ERAS®. ERAS® was developed by the AAMC. It transmits residency applications, letters of recommendation, medical student performance evaluations (MSPE, formerly dean's letters), transcripts, and other supporting documents to residency program directors via the Internet. ERAS® is also available to IMGs through the ECFMG.

Essential

See [MUST](#).

External moonlighting

Voluntary, compensated, medically-related work performed outside the institution where the resident is in training or at any of its related participating sites.

Extraordinary Circumstances

A circumstance that significantly alters the ability of a sponsor and its programs to support resident education.

Extreme Emergent Situation

A local event (such as a hospital-declared disaster for an epidemic) that affect resident education or the work environment but does not rise to the level of an extraordinary circumstance as defined in the ACGME Policies and Procedures, Section 20.00.

Faculty

Any individuals who have received a formal assignment to teach resident/fellow physicians. At some sites appointment to the medical staff of the hospital constitutes appointment to the faculty.

Fatigue management

Recognition by either a resident or supervisor of a level of resident fatigue that may adversely affect patient safety and enactment of appropriate countermeasures to mitigate the fatigue.

Fellow

A physician in a program of graduate medical education accredited by the ACGME who has completed the requirements for eligibility for first board certification in the specialty. The term "subspecialty residents" is also applied to such physicians. Other uses of the term "fellow" require modifiers for precision and clarity, e.g., research fellow.

Fellowship

See [SUBSPECIALTY PROGRAM](#).

Fifth Pathway

One of several ways that individuals who obtain their undergraduate medical education abroad can enter GME in the United States. The fifth pathway is a period of supervised clinical training for students who obtained their premedical education in the United States, received undergraduate medical training abroad, and passed Step 1 of the United States Medical Licensing Examination. After these students successfully complete a year of clinical training sponsored by an LCME-accredited US medical school and pass USMLE Step 2, they become eligible for an ACGME-accredited residency as an international medical graduate.

Fitness for duty

Mentally and physically able to effectively perform required duties and promote patient safety.

Focused Site Visit

A focused site visit assesses selected aspects of a program or sponsoring institution identified by a Review Committee (see ACGME Policies and Procedures, Section 17.30).

Formative Evaluation

Assessment of a resident/fellow with the primary purpose of providing feedback for improvement as well as to reinforce skills and behaviors that meet established criteria and standards without passing a judgment in the form of a permanently recorded grade or score.

FREIDA

Fellowship Residency Electronic Interactive Database. The Graduate Medical Education Directory (also called the Green Book) and FREIDA Online are resources created by the AMA to assist students in finding a residency program. FREIDA Online is a database with over 7,800 graduate medical education programs accredited by the ACGME as well as over 200 combined specialty programs.

Full Site Visit

A full site visit addresses and assesses compliance with all applicable standards and encompasses all aspects of a program or sponsoring institution (see ACGME Policies and Procedures, Section 17.30).

Graduate Medical Education (GME)

The period of didactic and clinical education in a medical specialty which follows the completion of a recognized undergraduate medical education and which prepares physicians for the independent practice of medicine in that specialty, also referred to as residency education. The term “graduate medical education” also applies to the period of didactic and clinical education in a medical subspecialty which follows the completion of education in a recognized medical specialty and which prepares physicians for the independent practice of medicine in that subspecialty.

GME Track

GME Track is a resident database and tracking system created in 2000 by the AAMC and the AMA. Its purpose is to assist GME administrators and program directors in the collection and management of GME data.

Gold Humanism Honor Society

An honor society at the University at Buffalo Jacobs School of Medicine which honors students and physicians for their commitment to providing excellent, compassionate care as well as their dedication to patients and families.

Graduate Medical Education Committee (GMEC)

The Graduate Medical Education Committee shall review from an institutional perspective the implementation at the University at Buffalo of the required “Institutional Requirements” of the

ACGME. The Committee shall advise and monitor the Office of Graduate Medical Education, the Medical Center, and the Medical School of pertinent issues related to house staff (resident and clinical fellow) programs of the institution. The Sponsoring Institution must have a GMEC that has the responsibility for monitoring and advising on all aspects of residency education.

Graduate-Year Level

Refers to a resident's current year of accredited GME. This designation may or may not correspond to the resident's particular year in a program. For example, a resident in pediatric cardiology could be in the first program year of the pediatric cardiology program but in his/her fourth graduate year of GME (including the 3 prior years of pediatrics.) Also referred to as 'post graduate year' or 'PGY'.

Grand Rounds

A formal meeting at which physicians discuss the clinical case of one or more patients. Grand rounds originated as part of residency training wherein new information was taught and clinical reasoning skills were enhanced. Grand rounds today are an integral component of medical education. They present clinical problems in medicine by focusing on current or interesting cases.

Home Call

Same as Pager Call. A call taken from outside the assigned site. Time in the hospital, exclusive of travel time, counts against the 80 hour per week limit but does not restart the clock for time off between scheduled in-house duty periods. Home Call may not be scheduled on the resident's one free day per week (averaged over four weeks).

In-House Call

Duty hours beyond the normal work day when residents are required to be immediately available in the assigned institution.

Initial Accreditation

A status of "Initial Accreditation" is conferred when a Review Committee determines that an application for a new program or sponsoring institution substantially complies with the requirements. Initial accreditation is considered a developmental stage.

Innovation

Experimentation initiated at the program level which may involve an individual program, a group of residents (e.g., PGY1 residents) or an individual resident (e.g., chief resident).

Institutional Review

The process undertaken by the ACGME to determine whether a sponsoring institution offering GME programs is in substantial compliance with the Institutional Requirements.

Integrated

A site may be considered integrated when the program director a) appoints the members of the faculty and is involved in the appointment of the chief of service at the integrated site, b) determines all rotations and assignments of residents, and c) is responsible for the overall conduct of the educational program in the integrated site. There must be a written agreement between the sponsoring institution and the integrated site stating that these provisions are in effect. This definition does not apply to all specialties. (See specific Program Requirements)

Intern

Historically, a designation for individuals in the first year of GME. This term is no longer used by the ACGME.

Internal Moonlighting

Voluntary, compensated, medically-related work (not related with training requirements) performed within the institution in which the resident is in training or at any of its related participating sites.

Internal Review

A self-evaluation process undertaken by GMEC to judge whether each program is in substantial compliance with accreditation requirements.

International Medical Graduate (IMG)

A graduate from a medical school outside the United States and Canada (and not accredited by the Liaison Committee on Medical Education). IMGs may be citizens of the United States who chose to be educated elsewhere or non-citizens who are admitted to the United States by US Immigration authorities. All IMGs should undertake residency education in the United States before they can obtain a license to practice medicine in the United States even if they were fully educated, licensed, and practicing in another country.

In-Training Examination

Formative examinations developed to evaluate resident/fellow progress in meeting the educational objectives of a residency/fellowship program. These examinations may be offered by certification boards or specialty societies.

Joint Commission (TJC)

Joint Commission, formally known as the Joint Commission on Accreditation of Healthcare Organizations or JCAHO, which evaluates and accredits health care organizations in the United States.

LCME

Liaison Committee on Medical Education, which accredits programs of medical education leading to the M.D. in the United States and in collaboration with the Committee on Accreditation of Canadian Medical Schools (CACMS), in Canada.

Letter of Notification

The official communication from a Review Committee that states the action taken by the Review Committee.

Master Affiliation Agreement

A written document that addresses GME responsibilities between a sponsoring institution and a major participating site.

Medical School Affiliation

A formal relationship between a medical school and a sponsoring institution.

Moonlighting

See EXTERNAL MOONLIGHTING and INTERNAL MOONLIGHTING.

Must

A term used to identify a requirement which is mandatory or done without fail. This term indicates an absolute requirement.

National Resident Matching Program (NRMP)

A private, not-for-profit corporation established in 1952 to provide a uniform date of appointment to positions in graduate medical education in the United States. Five organizations sponsor the NRMP: American Board of Medical Specialties, American Medical Association, Association of American Medical Colleges, American Hospital Association, and Council of Medical Specialty Societies. It is the most widely used matching program. There are other matches used by some programs such as the San Francisco Match or other specialty matches.

Night Float

Rotation or educational experience designed to either eliminate in-house call or to assist other residents during the night. Residents assigned to night float are assigned on-site duty during evening/night shifts and are responsible for admitting or cross-covering patients until morning and do not have daytime assignments. Rotation must have an educational focus.

Night Shift

Residents and/or fellows assigned to cover patients in the hospital overnight.

Notable Practice

A process or practice that a Review Committee or other ACGME committee deems worthy of notice. Notable practices are shared through the ACGME web site or other ACGME publications to provide programs and institutions with additional resources for resident education. Notable practices do *not* create additional requirements for programs or institutions.

One Day Off in Seven

One (1) continuous 24-hour period free from all administrative, clinical and educational activities.

Ownership of Institution

Refers to the governance, control, or type of ownership of the institution.

Pager Call

A call taken from outside the assigned site.

PALS

Pediatric Advanced Life Support.

PDSA (Plan-Do-Study-Act)

A four part method for discovering and correcting assignable causes to improve the quality of processes; the method may be applied to individual learning, courses, programs, institutions, and systems, in repeated cycles.

PLA

See PROGRAM LETTER OF AGREEMENT.

Pilot

An ACGME-approved project, which is initiated by the Review Committee and involves several residency/fellowship programs that elect to participate.

Post Graduate Year (PGY)

See also Graduate-Year Level.

Preliminary Positions

Designated Positions

Positions for residents who have already been accepted into another specialty, but who are completing prerequisites for that specialty (see Program Requirements for Surgery).

Non-Designated Positions

Positions for residents who at the time of admission to a program have not been accepted into any specialty (see Program Requirements for Surgery).

Primary Clinical Site

If the sponsoring institution is a hospital, it is by definition the principal or primary teaching hospital for the residency/fellowship program. If the sponsoring institution is a medical school, university, or consortium of hospitals, the hospital that is used most commonly in the residency/fellowship program is recognized as the primary clinical site.

Probationary Accreditation

An accreditation status that is conferred when the Review Committee determines that a program or sponsoring institution that has failed to demonstrate substantial compliance with the requirements.

Program

A structured educational experience in graduate medical education designed to conform to the Program Requirements of a particular specialty/subspecialty, the satisfactory completion of which may result in eligibility for board certification.

Program Director

The one physician designated with authority and accountability for the operation of the residency/fellowship program.

Program Evaluation

Systematic collection and analysis of information related to the design, implementation, and outcomes of a resident education program, for the purpose of monitoring and improving the quality and effectiveness of the program.

Program Evaluation Committee (PEC)

A required body comprised of a minimum of two members of the active teaching faculty and one resident appointed by the Program Director which assists the Program Director with the Annual Program Evaluation.

Program Quality Review Subcommittee (PQRS)

A committee comprised of Program Directors, Training Program Administrators and trainees charged with reviewing ACGME compliance for all programs accredited by the University at Buffalo.

Progress Report

A Review Committee may request a progress report that specifies information to be provided, including a due date for the report. The progress report must be reviewed by the sponsoring institution's Graduate Medical Education Committee, and must be signed by the designated institutional official prior to submission to the Review Committee.

Program Letter of Agreement (PLA)

A written document that addresses GME responsibilities between an individual accredited program and a site other than the sponsoring institution at which residents receive a required part of their education.

Program Merger

Two or more programs that combine to create a single program. One program may maintain continued accreditation while accreditation is voluntarily withdrawn from the other program or programs. Alternatively, both programs may be withdrawn and a new program may be established.

Program Year

Refers to the current year of education within a specific program; this designation may or may not correspond to the resident's graduate year level.

R3®

The Registration, Ranking, and Results system is a web-based software application through which all NRMP Matches are managed.

Rank Order List (ROL)

The list that is inputted to the NRMP and contains all of the interviewed candidates that the program has determined are ideal candidates.

Required

Educational experiences within a residency/fellowship program designated for completion by all residents/fellows.

Resident

A physician in an accredited graduate medical education program; known as interns, residents, and fellows.

Residency

A program accredited to provide a structured educational experience designed to conform to the Program Requirements of a particular specialty.

Review Committee Executive Director

Appointed by the ACGME Chief Executive Officer, is a chief staff person for a Review Committee and is responsible for all administrative matters of the Review Committee.

Review Committee, Residency Review Committee

The function of a Review Committee is to set accreditation standards and to provide a peer evaluation of residency programs and fellowships (or, in the case of the Institutional Review Committee, to set accreditation standards and to provide a peer evaluation of sponsoring institutions).

Rotation

An educational experience of planned activities in selected settings, over a specific time period, developed to meet goals and objectives of the program.

Resident Update System (RUS)

Contracts for all incoming trainees are requested through RUS.

Scheduled duty periods

Assigned duty within the institution encompassing hours which may be within the normal work day, beyond the normal work day, or a combination of both.

Scholarly Activity

An opportunity for residents/fellows and faculty to participate in research, as well as organized clinical discussions, rounds, journal clubs, and conferences. In addition, some members of the faculty should also demonstrate scholarship through one or more of the following: peer-reviewed funding; publication of original research or review articles in peer-reviewed journals or chapters in textbooks; publication or presentation of case reports or clinical series at local, regional, or national professional and scientific society meetings; or participation in national committees or educational organizations. (See Common Program Requirements)

Shall

See MUST.

Should

See Must. A term used to designate requirements so important that their absence must be justified. A program or institution may be cited for failing to comply with a requirement that includes the term 'should'.

Site

An organization providing educational experiences or educational assignments/rotations for residents/fellows.

Major Participating Site

A Review Committee-approved site to which all residents in at least one program rotate for a required educational experience, and for which a master affiliation agreement must be in place. To be designated as a major participating site in a two-year program, all residents must spend at least four months in a single required rotation or a combination of required rotations across both years of the program. In programs of three years or longer, all residents must spend at least six months in a single required rotation or a combination of required rotations across all years of the program. The term "major participating site" does not apply to sites providing required rotations in one year programs. (see MASTER AFFILIATION AGREEMENT)

Participating Site

An organization providing educational experiences or educational assignments/rotations for residents/fellows. Examples of sites include: a university, a medical school, a teaching hospital which includes its ambulatory clinics and related facilities, a private medical

practice or group practice, a nursing home, a school of public health, a health department, a federally qualified health center, a public health agency, an organized health care delivery system, a health maintenance organization (HMO), a medical examiner's office, a consortium or an educational foundation.

SOAP (Supplemental Offer and Acceptance Program)

Residents who did not match enter the SOAP program (formerly known as the "Scramble") where they are matched with programs that have unmatched positions.

Specialty Program

A structured educational experience in a field of medical practice following completion of medical school and, in some cases, prerequisite basic clinical education designed to conform to the Program Requirements of a particular specialty; also known as 'core' programs.

Sponsoring Institution

The organization (or entity) that assumes the ultimate financial and academic responsibility for a program of GME. The sponsoring institution has the primary purpose of providing educational programs and/or health care services (e.g., a university, a medical school, a hospital, a school of public health, a health department, a public health agency, an organized health care delivery system, a medical examiner's office, a consortium, an educational foundation). [Clarification: When the sponsoring institution is a non-rotation site the major associated hospital is the participating rotation site. Additionally, for multiple ambulatory medical sites under separate ownership from the sponsoring institution one central or corporate site (and address) must represent the satellite clinics (that are located within 10 miles of the main site).]

Strategic napping

Short sleep periods, taken as a component of fatigue management, which can mitigate the adverse effects of sleep loss.

Subspecialty Program

A structured educational experience following completion of a prerequisite specialty program in GME designed to conform to the Program Requirements of a particular subspecialty.

Dependent Subspecialty Program

A program that is required to function in conjunction with an accredited specialty/core program, usually reviewed conjointly with the specialty program, usually sponsored by the same sponsoring institution, and geographically proximate. The continued accreditation of the subspecialty program is dependent on the specialty program maintaining its accreditation.

Suggested

A term along with its companion "strongly suggested," used to indicate that something is distinctly urged rather than required. An institution or program will not be cited for failing to do something that is suggested or strongly suggested.

Summative Evaluation

Assessment with the primary purpose of establishing whether or not performance measured at a single defined point in time meets established performance standards, permanently recorded in the form of a grade or score.

Twelve-Week Rule: If an applicant to your program graduated from a non-LCME-accredited medical school located in one country but completed one or more clinical clerkships in a different country for a period of 12 weeks or greater, those clerkships must be certified. Access the list of approved medical schools at this link: [NYS 12-Week Rule](#)

Training Program Administrator (TPA)

The Training Program Administrator oversees the day-to-day operations of the training program in collaboration with the Program Director and in accordance with ACGME requirements.

Training Program Administrator Committee (TPAC)

A committee comprised of Training Program Administrators from all University at Buffalo-sponsored training programs. The committee meets four times per academic year to discuss important information and upcoming deadlines. In addition, TPAC offers opportunities for professional development, the sharing of best practices and peer-to-peer support and networking.

Transfer resident

Residents are considered as transfer residents under several conditions including: moving from one program to another within the same or different sponsoring institution; when entering a PGY 2 program requiring a preliminary year even if the resident was simultaneously accepted into the preliminary PGY1 program and the PGY2 program as part of the match (e.g., accepted to both programs right out of medical school). Before accepting a transfer resident, the program director of the 'receiving program' must obtain written or electronic verification of previous educational experiences and a summative competency-based performance evaluation from the current program director. The term 'transfer resident' and the responsibilities of the two program directors noted above *do not apply* to a resident who has *successfully completed* a residency and then is accepted into a subsequent residency or fellowship program.

Transitional-Year Program

A one-year educational experience in GME, which is structured to provide a program of multiple clinical disciplines; its design to facilitate the choice of and/or preparation for a specialty. The transitional year is not a complete graduate education program in preparation for the practice of medicine.

Transitions of care

The relaying of complete and accurate patient information between individuals or teams in transferring responsibility for patient care in the healthcare setting.

Unannounced Site Visit

A site visit that is unannounced due to the urgency of an issue(s) that needs immediate review. A program may receive up to three weeks' notice of unannounced site visits.

USMLE

United States Medical licensing Exam. USMLE is a three-part exam taken by allopathic medical students and residents. Each part of the USMLE is called a Step. Step 1 is usually taken at the end of the second year of medical school. Step 2 is usually taken prior to graduation from US medical schools. Step 2 has two parts: a clinical knowledge (CK) exam and a clinical skills assessment (CSA or CS). Step 3 is usually taken during or after the first year of residency training.

Warning

If a program or sponsoring institution does not demonstrate substantial compliance, a Review Committee may warn a program or sponsoring institution if it determines areas of non-compliance may jeopardize its accreditation status.

Withdrawal of Accreditation

A Review Committee determines that a program or sponsoring institution has failed to demonstrate substantial compliance with the requirements.

Program Administrator Timeline

Target Month	Program Administrator Responsibility	Purpose and Goals	Program Tasks	Reference Sources
JULY	Program Orientation for Resident and Fellows	Review department/division orientation agenda to identify speakers, necessary handouts (goals/objectives, rotation schedules, program or institutional policies manual etc.), required testing (drug/background check etc), necessary training (ACLS, PALS, BLS, HIPAA compliance).	Set up department orientation	
	GME Track Resident Update (opens mid-July)	GME Track is used to collect statistical data from medical institutions for research and educational purposes. Programs and institutions will be asked to report data on accredited and non-accredited programs annually. 1. First-year resident data can be downloaded and		Go to www.aamc.org under services, GME Track. Select Data>Member Reporting Tools, Select GME Track.

	imported into ACGME WebADS or other computer tracking systems. Programs can also download ACGME WebADS data and import program data into GME Track to avoid duplicating survey information later in the academic year.		
Beginning of Training Year	Orientation-Hospital, GME office, order business cards, lab coats, etc. Make sure all databases are updated. Distribute updated Residency Handbook.	Start working on databases in April.	
ERAS: Applications Received for July Cycle Fellowship Programs (opens July 15 th)	Review Applications (Download from ERAS) Schedule Interview Dates Invite Applicants to Interview		www.aamc.org Select Services>Centralized Application Services>ERAS
In-Service Exam	Verify dates for your program. Schedule room, Proctor exam		
ABIM FasTrack Update for Internal Medicine and Subspecialties (opens late July)	The American Board of Internal Medicine requires annual evaluations to be submitted for all ABIM certified and ACGME accredited programs.		http://www.abim.org/program-directors-administrators/fastrack.aspx
Annual Plan	Annual Plan requests solicited from the University at Buffalo for		

		the following academic year (due late July).		
	Other- Program Specific			

<p style="text-align: center;">AUGUST</p>	<p>NRMP Main Match Opens (Late August/Early September)</p>	<p>Review Match Agreement for compliance details.</p> <ol style="list-style-type: none"> 1. Consider program responsibilities for Match compliance to avoid potential Match violations. 2. Review applicant responsibilities for Match compliance. 3. The ACGME Institutional requirements "strongly suggests" sponsoring institutions and all of its programs participate in an organized matching program such as the NRMP. 4. NRMP Match violations are reported to the IRC, RRC, and the applicants' medical school. 5. Programs with match violations will be flagged in the NRMP system for a specified period of time, and could have an 		<p>NRMP website: www.nrmp.org</p>
---	--	--	--	---

		impact on recruitment efforts for qualified applicants.		
	ERAS: PDWS Available for September Cycle Residency Programs	Electronic Residency Application Services (ERAS) developed by AAMC to facilitate applications to residency/fellowship programs.		http://www.aamc.org Select Services>Centralized Services>ERAS
	GME Track Resident Update closes (late September)			
	Scholarly Activities	Manage Journal Club, M&M conf., Research Conf., Case Conferences		
	ACGME Annual Program Updates Begin	<ol style="list-style-type: none"> 1. Complete any remaining data not previously updated in WebADS. 2. Review raw duty hour data to assure accurate reporting of duty hours. 3. Annual updates must be submitted to GME two weeks prior to the ACGME deadline. This allows for the review of submissions by the GME Accreditation team 		Data collection system www.acgme.org Select Accreditation Data Systems

		(an AIR action plan).		
	Other = Program Specific			

SEPTEMBER	Recruitment: ERAS Applications Available for September Cycle Residency Programs (September 15 th)	Review Applications (Download from ERAS) Schedule Interview Dates Invite Applicants to Interview ⁴ after verification of NRMP Match Applicant History.		
	Prepare for Fellowship Interview Season	Fellow Appointments: Set up interview dates Invitations for interviews Selection committee meet to plan interviewing season Remind coworkers and other hospital personnel that resident recruitment season is beginning. Other things to consider: Eligibility for appointment: visa issues, number of residents, resident transfer requirements, Appointment of Fellows and Other Learner		
	Submission of NRMP Match Quotas	<ol style="list-style-type: none"> 1. Quota changes must have the approval of Designated Institutional Official (DIO). 2. It is important to ensure that the number of matched applicants through the NRMP do not create overages in the total resident complement approved by the RRC for an individual training program 		<p>NRMP website: www.nrmp.org</p> <p>Guide to Common Program Requirements section II.A.4n2, pg 4. (www.acgme.org)</p>

		and the UB GME Annual Plan position approvals. 3. The program accreditation letter will outline the total number of house staff a program can train in a given academic year. Overages require approvals by the GMEC/DIO and the RRC.		
	ABIM FasTrack Update Due (late September)			
	Other—Program Specific			

OCTOBER	Prepare for Residency Interview season	<p>Resident Appointments:</p> <p>Set up interview dates Invitations for interviews Selection committee meet to plan interviewing season Remind coworkers and other hospital personnel that resident recruitment season is beginning.</p> <p>Other things to consider: Eligibility for appointment: visa issues, number of residents, resident transfer requirements, Appointment of Fellows and Other Learner</p>		<p>Program Director Guide to the Common Requirements section III. A-D; page 21</p> <p>Program Directors Guide to the Common Program Requirements Page 20, Section III.A-D.</p> <p>Some Specialty Specific RRC Requirements on Eligibility may also apply</p>
	Complete Resident Application Review-	<p>Interview seasons may vary in length depending on the number of applicants planned for interviews, and the number of training slots a program hopes to fill.</p> <p>Dean's Letter (Residency Applicants) Nov. 1</p> <p>Interviews/Scheduling</p> <p>Book Hotel rooms, escorting</p> <p>Rank order list due for Fellowship Programs (mid-November)</p>	<p>AAMC- Roadmap to Residency, free at the AAMC store</p> <p>https://services.aamc.org/publications</p>	Complete Resident Application Review
	Quarterly Rotation Review Evaluation with Program Director	Print Evaluation from , ACGME logs for review		

	Residents/Fellows	Ensure that residents and fellows are compliant with facility flu shot protocols.		
	Social Activities	Attend quarterly Training Program Administrator (TPAC) meeting.		
	Other- Program Specific			

NOVEMBER	ERAS: PDWS Available for December Cycle Fellowship Programs			
	Semi-Annual Reviews	<ol style="list-style-type: none"> 1. Formative evaluations from previous months should be used to provide feedback to residents on their performance. 2. Semi-annual reviews should also include a review of case logs/patient logs, if required by the RRC or Board, and a review of the resident's participation at required conferences within the training program. 3. Plans for remediation for academic deficiencies should be discussed at this time for any resident of concern. 4. Remediation plans should include specific achievement goals, a timeframe for achievement, and consequences if goals 		<p>Program Directors Guide to Common Program Requirements Page 47-52, Section V.A.1 a - c.</p> <p>Also review programs specific requirements on resident evaluations and feedback to determine other components required by the RRC for review during semi-annual evaluation of the residents' performance.</p>

		are not achieved. 5. Documentation of the semi-annual review must be in and also printed for CCC Meeting in December.		
	Other–Program Specific			

DECEMBER	Residency Interviews (first 2-3 weeks, times vary)	Schedule applicants Obtain scores/feedback from interviewers NRMP match quota deadline Set up breakfast, lunches for applicants		
	Schedule Clinical Competency Committee Meeting	Schedule semi-annual meeting. Print out milestone evaluations, 360 evaluations and ACGME case logs for review.	Need to report Milestones semi-annually to ACGME and also put in E*Value after CCC Meeting	
	NRMP Match - Fellowship	Match results for July cycle fellowship programs are available (early December). Notify Program faculty of matched candidates. Send congratulatory/welcome e-mails to matched candidates.		
	Social Activities	Attend quarterly Training Program Administrator (TPAC) meeting.		
	Other—Program Specific			

<p>JANUARY</p>	<p>ACGME Anonymous Resident Surveys Begin (January - May)</p> <p>ACGME Annual Faculty Survey. This survey will mirror the resident survey window and requires 60% compliance rate to access results.</p>	<p>The Program Director and Coordinator will be notified by the ACGME of the timeframe of the survey.</p> <ol style="list-style-type: none"> 1. The ACGME Anonymous Resident Survey will be used throughout the accreditation cycle, and specifically during the RRC site visit to document compliance for work hours. 2. Review the survey questions with residents to assure their understanding/interpretation of survey questions before the survey opens. 3. Assure all contact information in WebADS is correct for all active residents. 4. All programs must achieve 70% response rate, or the program will be deemed noncompliant with this process and will 		<p>See Resident Survey Sample ACGME website www.acgme.org "resident survey sample".</p> <p>Programs with 4 or less residents will receive an aggregate report after 3 years of data is obtained.</p> <p>Review prior surveys in WebADS to document recurrent areas of noncompliance</p>
----------------	--	---	--	--

		<p>not receive results.</p> <p>5. Review survey results with faculty and residents to document resolution of identified areas of noncompliance ($\leq 85\%$).</p> <p>6. Include a discussion of the survey results in the annual program evaluation committee meeting and SMART action plans responding to deficiencies.</p>		
	Interview Process Continues	<p>Follow-up letters to applicants</p> <p>Obtain scores/feedback from interviewers</p> <p>NRMP match quota deadline</p>		
	Recruitment	<p>Preparation of Files (ERAS) for Selection committee -Fellowships</p> <p>Begin Rank List</p> <p>Preparation-Residency Programs</p>		
	NRMP Match - Urology	<p>Urology Match results available.</p>		
	Graduation Planning	<p>Graduation Diplomas</p> <p>Prepare for Awards and certificates</p>		

	Program Maintenance	Visa continuation for current fellows Visa paperwork for new fellows Budget for next Academic year		
	Other—Program Specific	CREOG Exams		

FEBRUARY	Assist PD with match list - Residencies	Numerous phone calls from applicants Enter NRMP match list/Verify Match list		
	Program Maintenance	Process continuing residents appointments: Report contract non-renewal decisions to GME Order Certificates for graduating residents Written notification for non-renewal to residents advising of nonrenewal and grievance process		See Institutional Requirements Section II.D4d 1 -4
	Scheduling	Work on block templates for next academic year		
	Appointment Process - Fellowship Programs	Notify all incoming fellows of UB and program-specific onboarding requirements and request necessary documentation.		
	Other—Program Specific			

MARCH	NRMP Main Match Results - Residency (3rd Thursday in March) Varies for different programs	Let Faculty/department know who matched Send out congratulation email to matched candidates		
	Appointment Process - Residency Programs	Review VISA requirements for IMG accepted in program		Educational Commission for Foreign Medical Graduates www.ecfm.org
	Notify GME Human Resources Office of Extensions of Training, Terminations	GME Office must confirm appropriate due process for grievances, if the resident disagrees with the decision. GME must also update employment system(s) for certificates of graduation, salary support and other patient care access badges	RUS update status of existing residents/fellows and add new residents/fellows	See Institutional Requirements Section II.D4d 1 -4
	GME Mandatory Meeting	Attend Mandatory TPA GME Orientation Mtg.		
	Work with GME Human Resources Office RE: New Employee Paperwork (Due late April or sooner if possible)	Send copies of ERAS applications plus checklist documents for VISA extensions/applications located on UB GME website to HR		See Institutional Requirements Section II.D4d 1 -4

	<p>Program Maintenance</p>	<p>Program Letter of Agreement (PLA) between the program and each participating site [renewed at least every five years] Major changes to participating sites (length of the rotation) may require GMEC/DIO and RRC Approval. The addition or deletion of a participating site must be reported in WebADS. RRC Program Specific Requirements on additional areas to include in PLAs will be verified during internal and external site reviews. Copies of PLAs will be needed for internal and external reviews.</p>		<p>Section 1.B, pg. 5-7 of the Program Directors Guide to the Common Requirements.</p> <p>Also review Program Specific Requirements for RRC expectations for participating training sites.</p>
	<p>Evaluation: Faculty Evaluation/Faculty Development</p>	<p>Evaluate residents performance Faculty evaluation of program Review curriculum-Annual Program Improvement</p>	<p>Need to input into E*Value</p>	<p>V.B., pg. 49 Program Directors Guide to the Common Program Requirements</p>

		Meeting. Discuss how to improve the program.		
	Graduation Preparation	Graduating resident gift Prepare departure check list		
	Other–Program Specific			

APRIL	Review and Update Resident and Fellow Handbooks	Educational Program: Curriculum Component		IV.A. 1-4, pg. 24-26 Program Directors Guide to the Common Program Requirement
	Update Orientation Materials	Update Goals and Objectives, Policies and Procedures and other orientation documents; update didactic program. Overall Educational goals; competency based goals and objectives for each assignment Didactic sessions; delineation of resident responsibilities		Program directors Guide to the Common Requirements section IV.A.1-4, page 25
	GME Annual Program Evaluation [^] , Graduation Survey* and Faculty evaluation by Residents/Fellows (Survey period April 1-30). [^] Referred to as GME Resident & Fellow Satisfaction Survey *GME Resident & Fellow Graduation Survey.	Residents must be allowed, at least annually to confidentially evaluate faculty on their teaching abilities, clinical knowledge, and commitment to the educational program, professionalism and scholarly activities. The evaluation form should avoid identifying rotation names, PGY levels or specific months to assure greater confidentiality. The program director should utilize this data to determine continued		II.A 4d and V.B 1-4, pg. 55-56 Program Directors Guide to the Common Program Requirements

		participation of faculty in the educational program. Documentation of confidential written evaluations of the program, faculty will be required for internal and external site reviews. Schedule PD evaluation of Faculty.		
	Graduation Preparation (Ongoing)	Order gifts Plan Graduation Ceremony, Party (If applicable) Review case logs Awards		
	Program Maintenance	Contract renewals for continuing residents/fellows Verify Web ADS for Resident Survey Release ERAS Registration Prepare Year-End Evaluations All continuing and graduating residents must complete annual health assessment/ppd/fit test	Requirements at hospital employee health no later than June 1 st . Notification comes to residents Employee Health Office through E*Value e-mails	
	Prepare incoming residents/fellows for tutorials from the E*Value Administrator	Email incoming fellows/residents to expect tutorials and they must be completed by June 1st		Tutorials include NPI numbers and infection control certificates

		<p>Orientation Preparation: Hospital, GME office, order business cards, lab coats, etc. Make sure all databases are updated. Update Residency Handbook.</p>		
	Incoming Resident Preparation	<p>Work on Dept. Orientation Send paperwork to GME office Add to ACGME WebADS Make sure new resident is in (ERAS upload)</p>		
	Other—Program Specific			

MAY	Resident Process for next academic year	<p>American Board Radiology Resident Update Work on Rotation schedule for next academic year. Enter in E*Value and set up rotation evaluations in E*Value Update information on all residents in RUS Contracts- Signed and returned to GME office Start working on Orientation schedule Add New Residents to WebADS-ACGME, RUS and E*Value Monitor New Resident progress on mandatory GME orientation tutorial due June 1st</p>		
	Semi-Annual Reviews	<ol style="list-style-type: none"> 1 Formative evaluations from previous months should be used to provide feedback to residents on their performance. 2 Semi-annual reviews should also include a review of case logs/patient logs, if required by the RRC or Board, and a review of the resident's 		<p>Program Directors Guide to Common Program Requirements Page 42-46, Section V.A.1 a - c.</p> <p>Also review programs specific requirements on resident evaluations and feedback to determine other components required by the RRC for review during semi-annual</p>

		<p>participation at required conferences within the training program.</p> <p>³ Plans for remediation for academic deficiencies should be discussed at this time for any resident of concern.</p> <p>⁴ Remediation plans should include specific achievement goals, a timeframe for achievement, and consequences if goals are not achieved.</p> <p>⁵ Documentation of the semi-annual review must be in</p> <p>⁶ This documentation will be needed for internal and external site reviews.</p>		<p>evaluation of the resident's performance.</p>
	<p>Final Evaluations for Graduating Residents (Summative Evaluation)</p>	<p>The final evaluation must specifically verify that "the resident has demonstrated sufficient competence to enter practice without direct supervision". This statement will be</p>		<p>Section V.A2a-b, pg. 47 Program Directors Guide to the Common Program Requirements</p>

		verified by internal and external site visitors via the graduate files.		
	Review Committee Requirements	Quality Improvement Projects Completed Case Logs completed Schedule Program Evaluation Committee Meeting (PEC) - Documentation of meeting with attendance and minutes Written Plan for Program Improvements for Upcoming Year		
	Other—Program Specific	Schedule Annual Resident Picture		

JUNE	Annual Program Evaluation Meeting (APE) (April -June)	Program Director and TPA collect data from surveys and improvement meeting and enters data on APE form in E*Value. E*Value tool is due by August 1 st .		Documents are used for internal reviews/audits and most importantly for continued accreditation.
	Graduating Resident	Schedule and complete summative evaluation with Program Director Complete check list -collect all keys, badge, etc. Close out in ACGME and mark as Graduated in Resident Management System.		
	Scheduling (due in by July 1 st)	Ensure that the upcoming academic year schedule has been completed and entered into		
	Orientation	Finalize all orientation schedules and materials for both UB and program orientation.		