

Department of Anesthesia

Title:

Resident Evaluation

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Attachment:**POLICY:**

The residency-training program follows the requirements of the American Board of Anesthesiology. Residents will therefore receive formal written evaluation of their progress in the residency-training program from the Clinical Competence Committee every sixth months at a minimum.

PROCEDURE:

The Program Director appoints members and chair of the Clinical Competency Committee (CCC) annually. The Clinical Competence Committee will meet quarterly to evaluate resident performance in the training program. In forming their collective opinion, the members will consider:

1. Monthly clinical evaluations by faculty to the CCC.
2. Performance on formal exams
3. Information from sources outside the Department of Anesthesia
 - a. Letters of complaint or praise
 - b. Evaluations from extramural rotations (critical care)
 - c. Invited reviewers

In July and January, the CCC will formally report the findings of the committee to the resident, the American Board of Anesthesiology and the Department Chair/Program Director using the RTID (Resident Training Information Database) forms. The resident will receive a written copy of the actual submission to the ABA.

In October and April, the CCC will meet and evaluate the residents without submitting a report to the ABA. The resident, however, will be informed of the evaluation by meeting with the Program Director. A written evaluation will be provided if the resident performance is judged to be “unsatisfactory”. If the resident is not granted ABA credit for the 6-month training period, written acknowledgement of the receipt of the “unsatisfactory” evaluation will be requested from the resident. This will also be filed with the American Board of Anesthesiology, as per their requirements.

The Program Director will then meet briefly with each resident to outline achievements and areas for improvement. If a resident is found to be “unsatisfactory” for the 3-month period, the resident and Program Director/Department Chair will be notified in writing.

The Program Director and/or the Chief of Service at MedStar Georgetown University Hospital has the authority to suspend a resident from a clinical training site where there is judged to be impaired performance that may adversely affect the health and safety of either the trainee or a patient.

Action	July	October	January	April
Written CCC Report to Resident	Yes	Only if “unsatisfactory”	Yes	Only if “unsatisfactory”
Written Report to ABA	Yes	No	Yes	No
Resident Signature With Copy to ABA	Only if “unsatisfactory”	No	Only if “unsatisfactory”	No
Resident Meeting with Director of Resident Education	Yes	Yes	Yes	Yes

Positions:

Department Chair: Academic Chair of the Medical School Department and appoints the Program Director with the concurrence and approval of the VPMA, MGUH and the Designated Institutional Official (DIO) from MGUH to the ACGME.

Program Director: Recognized formally by the ACGME RRC and the ABA as the individual in charge of the training program

Chief of Service: Individual responsible for anesthesia and pain management in MGUH. This individual will also usually be the Chair in the Medical School.

Chair and Members, CCC: Individuals appointed by the Program Director annually to judge the clinical competence of the residents. The CCC also functions as the Education Committee.

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