



## Stony Brook Medicine Graduate Medical Education

<b>Subject:</b> GME0030 Resident Responsibilities	<b>Published Date:</b> 06/01/2018
Graduate Medical Education	<b>Next Review Date:</b> 06/01/2021
<b>Scope:</b> SBM Stony Brook Campus	<b>Original Creation Date:</b> 03/22/2004

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### **Responsible Department/Division/Committee:**

Graduate Medical Education Committee

### **Policy:**

The role of residency training is to learn the skills and knowledge appropriate to the residents' respective specialty, and demonstrate satisfactorily prior to program completion the requisite achievement in their specialty appropriate to allow for either independent practice or pursuit of subsequent training. As such, residents are granted privileges according to the policies of Stony Brook University Hospital (SBUH), the Stony Brook GMEC, and under the supervision of the attending physician staff, to interact with patients, to perform histories and examinations, to order diagnostic testing and therapeutic interventions, to interpret data regarding patients, and to perform diagnostic and therapeutic procedures.

### **Definitions:**

None

### **Procedures:**

Residency training must be done under the supervision and guidance of the attending physician staff, as described in the policies of SBUH and the GMEC, individual departments, and the ACGME, all residents must be cognizant of the following:

- Residents must be aware of their individual limitations and may not attempt to provide clinical services or do procedures for which they are not trained.
- Residents must understand the level of responsibility appropriate for their stage of training and may not practice outside of the scope of that privilege.
- Each resident is responsible for communicating significant patient care issues to the attending physician. Such communication must be documented in the patient record.
- Failure to function within graduated levels of responsibility or to communicate significant patient care issues to the responsible attending physician may result in the removal of the resident from patient care activities.

### **Commitment of Residents**

1. The resident must acknowledge the fundamental obligation as a physician to place the patients' welfare as the principal aim. High quality health care and patient safety are prime objectives in achieving that goal.
2. The resident must consistently demonstrate honesty, compassion, integrity and dependability.
3. The resident will adhere to the highest standards of the medical profession and conduct him/herself accordingly in all interactions. The resident will demonstrate respect for all patients, families and members of the health care team without regard to gender, race, national origin, religion, economic status, disability or sexual orientation.
4. The resident will learn from being involved in the direct care of patients and from the guidance of faculty and other members of the healthcare team. The resident must understand the need for faculty to supervise all of the care provided to patients.
5. The resident will secure direct assistance from faculty or appropriately experienced advanced residents whenever confronted with high-risk situations or with clinical decisions that exceed his/her confidence or skill level to handle alone. Each program has its own

enumeration of specific conditions which mandate that the resident contact the supervising attending in real time.

6. The resident will openly accept candid and constructive feedback from faculty and all others who observe his/her performance, recognizing that external assessments are critical tools for improvement as a physician.

7. The resident will provide candid and constructive feedback on the performance of other residents, students and faculty. This is part of a physicians' life-long obligation to participate in peer evaluation and quality improvement.

8. The resident will assist both medical students and other residents in meeting their professional obligations by serving as a teacher and a role model.

### **Conference and Travel**

1. The primary goal of residency is clinical education. However, conference attendance and presentation are important parts of graduate medical education program.
2. The program directors of the individual training programs sponsored by the institution will create and implement the policy for residents in their program regarding conference attendance and travel for their trainees based on
  - The residents' educational needs
  - The needs of the clinical learning and service within the hospital
  - The rules and expectations of the ACGME Review Committee within their specialty

The GMEC will monitor this policy through annual review of the program

**Forms: (Ctrl-Click form name to view)**

None

**Policy Cross Reference: (Ctrl-Click policy name to view)**

None

**Relevant Standards/Codes/Rules/Regulations/Statutes:**

None

**References and Resources:**

None