# **Program Director's Training Course Questionnaire**

#### Instructions:

Please select the best answer.

Once ALL questions have been answered please submit to the GME office for scoring.

### **PDTC-1 History and Responsibilities**

#### Question 1

Medicare funding of GME

- a) Was established in 1914
- b) Regulate the six competencies
- c) Is controlled by congress
- d) Is controlled by the AMA

#### Question 2

The site visitor

- a) Is the one that determines the program's accreditation cycle
- b) Is usually trained in the same field to be surveyed
- c) Is appointed by the program director
- d) Verifies the information entered in the PIF

#### Question 3

#### The GMEC

- a) Is chaired by one of the program directors
- b) Includes residents as members
- c) Approves the hiring of faculty by departments
- d) Has no institutional authority

# **PDTC-2 Institutional Requirements**

### Question 1

The annual report to the Organized Medical Staff (OMS)

- a) Is presented by the Dean
- b) Is usually emailed
- c) Is an institutional requirement
- d) Is a residency program requirement

#### Question 2

Residents are considered employees because

- a) They are under supervision
- b) Receive a salary
- c) There are goals and objectives to achieve
- d) Have to take the boards

#### Ouestion 3

The TT El Paso GME website

- a) Has a copy of the residents' contract
- b) Has all the NRMP policies
- c) Has all the ACGME polices
- d) Has the University Medical Center medical staff bylaws

# **PDTC-3 Program Director**

#### Question 2

### **Program Director Qualifications**

- a) Be appointed by the chair of the department
- b) Be approved by the GMEC
- c) Have 20% of protected time for this function
- d) Can have a part time residency coordinator

#### Question 2

# Program Director Responsibilities

- a) Run the department
- b) Provide reports to the Chair
- c) Provide reports to the chief of staff
- d) Be an active member of the GMEC

#### Question 3

If a program director wants to increase the size of the program

- a) Can directly request it to the ACGME
- b) Can request it to the chair of his/her department
- c) Can request it to the American Board of Medical Subspecialties
- d) Needs to get GMEC/DIO approval

#### **PDTC-4 Candidate Selection**

#### Question 1

#### **ERAS and NRMP**

- a) Are interconnected
- b) Both allow you to send candidates for the match
- c) NRMP implies a contractual obligation between the program and candidate
- d) ERAS allows unlimited access to programs by candidates free of charge

#### Question 2

The Candidate Selection Committee

- a) Is headed by the chair of the department
- b) Should include residents as members
- c) Does not need to have a formal structure
- d) Is usually not necessary

#### Ouestion 3

Can ask during the candidate interview

- a) What is their religion
- b) Whether female candidates are planning to pregnant or not
- c) What race they are considered a member of
- d) If they understand the commitment toward residency

#### PDTC-5 Personnel

#### Question 1

The residency program coordinator

- a) Should be a clerical type of trained individual
- b) Has the ultimate responsibility of running the program
- c) Will write the PIF
- d) Help you with the resident contract renewals

#### Question2

The core faculty

- a) Need to be formally trained in development and evaluation of competencies
- b) Are only eligible if board certified
- c) Research requirement s are not required
- d) Is the same across specialties

#### Ouestion 3

The institution and program has the obligation to provide access to

- a) Available local gym information
- b) Research opportunities
- c) All electronic databases in the market
- d) Their preferred fellowship programs

#### PDTC-6 Curriculum

#### Question 1

#### Curriculum

- a) A needs assessment is necessary for proper development
- b) The RRC citations are usually not relevant in the curriculum development
- c) There should be a single evaluation form for all rotations
- d) There should be a single evaluation tool for all rotations

#### Question 2

# **Goals and Objectives**

- a) A goal is concrete
- b) An objective is abstract
- c) A goal is intangible
- d) An objective cannot be validated

### Question 3

# The outcomes project

- a) Can be used for curriculum development
- b) Is exclusively patient care driven
- c) Is optional for training programs
- d) Is only required in the last year of training

### **PDTC-7 Competencies**

#### Question 1

### The competencies

- a) The common definitions apply to all programs
- b) The specific definitions are related to patient care
- c) Medical knowledge is difficult to measure
- d) The in training exam is mainly used to measure systems based practice

#### Question 2

#### The medical matrix

- a) Is a well known movie
- b) It combines the ACGME competencies with the Institute of Medicine quality dimensions
- c) It is useful for disciplinary purposes
- d) Its only of use in internal medicines residency training

#### **Ouestion 3**

### Professionalism

- a) Frequently narrative description of behavior omitted
- b) Easy to measure
- c) Is not relevant during residency
- d) Is only important to address when misconduct occurs

# **PDTC-8 Competency Achievement Assessment**

#### Question 1

#### **Resident Evaluations**

- a) Are not very useful
- b) Need to be validated
- c) Can only be used for summative purposes
- d) Have little correlation with residents performance

#### Question 2

#### Patient Care Assessment tools

- a) Should only be summative
- b) "neutral" evaluators are of little value
- c) miniCEX is one tool for this purpose
- d) Can only be used by the faculty

### Question 3

# Research during residency

- a) An optional requirement
- b) Can only be used in the research track residencies
- c) Can be combined with a quality improvement tool
- d) Only funded research is of curricular value

# **PDTC-9 Disciplinary Action Policy**

#### Question 1

Adverse actions against residents

- a) Behavioral problems are usually correctible
- b) Misconduct disciplinary process can go directly to dismissal of a resident
- c) Judgmental observations are helpful in the process
- d) Verbal reprimands should never be allowed

#### Question 2

#### Probation

- a) Requires DIO notification by the program director
- b) Can be left out of the resident's file
- c) Should be used preferably as a first instance
- d) Is less relevant than observation

#### Question 3

# The appeal process

- a) Only applies to observation
- b) Can be done informally
- c) Requires an ad hoc committee with residents from the same program
- d) Residents assistance program is a useful tool in case residents under significant stress

# **PDTC-10 Annual Program Review**

### Question 1

The annual program review

- a) Can be done in segments
- b) Has to be done all at once
- c) Is an optional requirement
- d) Is mandated by the state board of medical examiners

#### Question 2

The annual program review material

- a) Can be patient medical records
- b) Only data from graduated residents
- c) Data from the goals and objectives of each rotation
- d) Departmental overall financial report

### Question 3

The annual program review report

- a) Has to be performed in writing
- b) Can be only presented verbally
- c) Has the only purpose of information
- d) There briefer the better

# **PDTC-11 Duty Hours**

### Question 1

### **Duty hours**

- a) The 80 hour rule is averaged
- b) The 24+4 rule is averaged
- c) Moonlighting is allowed by PGY-1
- d) The 16 hour rule applies to PGY-2 and above

#### Question 2

### Resident supervision

- a) Direct supervision is appropriate only for PGY-1's
- b) A PGY-1 can be supervised by a PGY-1
- c) Oversight supervision is allowed for PGY-1's
- d) At home call should not be more often than six days in a row, averaged

### Question 3

# Night float

- a) Mandatory
- b) Can go over the 80 hour limit
- c) The 24+4 rule applies
- d) Maximum of six consecutive nights

#### PDTC-12 Site Visit

#### Question 1

The site visit process by the ACGME

- a) You will be notified one year in advance
- b) The meeting is with faculty and residents together
- c) A PIF needs to be submitted to the site visitor prior to the site visit
- d) A PIF needs to be submitted to the ACGME-RRC prior to the site visit

### Question 2

#### The PIF

- a) The form can be found at your RRC web site
- b) A consultant review is mandatory
- c) The Dean of the school has to sign it
- d) The Designated Institutional Official has to sign it

#### Ouestion 3

The ACGME notification process

- a) Occurs within a week of the site visit
- b) The formal letter of accreditation usually takes weeks to arrive after the site visit
- c) Is usually via a phone call
- d) You need to submit a written request to obtain your letter of accreditation

### PDTC 13 GME Budget

#### Question 1

### GME funding

- a) Is all from federal money
- b) Is only for residents' salaries
- c) Has been increasing every year
- d) Is mostly provided from CMS

#### Question2

#### IME

- a) Is a small proportion of the CMS funding
- b) It pays for the residents' salaries and benefits
- c) It cover for longer patient hospital stay at teaching hospitals
- d) It is unlimited as long is properly justified

### Question 3

# Your GME budget

- a) Is approved by the chair and administrator
- b) You can include cost of patients' laboratory tests
- c) Helpful only when your residents generate significant income
- d) Required because you are personally accountable for any shortfalls