



Radiology Department Administrative Policy and Procedure

Title: SUPERVISION OF RESIDENTS AND COMMUNICATION TO FACULTY		Policy Number: RAD109
Regulation Reference:	Title ACGME	Effective Date: 12/16/2024

Policy Statement The purpose of this policy is to establish a protocol and procedure standards within the Paul L. Foster School of Medicine at Texas Tech University Health Sciences Center Department of Radiology for the Diagnostic Radiology residency to ensure the quality and safety on supervision of Residents and establish guidelines for circumstances and events requiring Residents to communicate with supervising Faculty members.

Procedure

Definition and Scope:

The training program is designed to enable Residents to acquire and demonstrate the knowledge, skills, and judgment necessary for competence in the practice of radiology. This is primarily achieved by involvement in clinical case management under direct supervision and guidance of the Faculty. As Residents progress in acquiring knowledge, skills and judgment, indirect supervision and guidance is provided by Faculty. Formal teaching supplements this educational process by providing lectures, demonstrations, simulations and conferences as well as electronic teaching aids.

All studies preliminarily interpreted and/or performed by Residents are promptly reviewed and edited by a Faculty member before final reports are submitted. Any significant difference between preliminary and final report is to be promptly called to the attention of the patient’s physician as a “Critical Finding”.

First year Residents are initially taught the practical clinical skills necessary to interpret emergency and other urgent imaging examinations while serving on the wet desk during weekdays and weekend days (8 am-5 pm) under Faculty and/or senior resident direct supervision. All other Residents are supervised by Faculty under direct or indirect supervision based on their level of performance.

The Faculty is on-site on weekdays from 8 am-5 pm with remote coverage from 5 pm-12 am. There is Faculty on-call during off duty hours for Diagnostic Radiology and Interventional Radiology. On weekends and Holidays, there is Faculty coverage from 8 am-5 pm either on site or remote. The Interventional Radiology Faculty is on call at all times according to schedule.

Faculty members are on-site during all interventional, neuroradiology, nuclear medicine or fluoroscopic procedures performed by Residents. There is a documented, supervised experience in interventional and other procedures as described by the ACGME Special Requirements for Core Residency Programs in Diagnostic Radiology. The level of supervision is based on the Residents’ performance as they progress in their knowledge, skills and judgement on performing procedures.

Current and accurate procedure logs are to be maintained in each Residents ACGME database as requirement for promotion. These logs need to be updated regularly and should be available for semiannual review by the program director as a monitoring process to ensure that the Residents are exposed to an optimal number of cases and procedures prior to graduation.

First year Residents are required to successfully pass the Night Call Qualifying Examination before progressing to independent night Emergency Radiology requirements under the direct or indirect supervision of a Faculty member.

Resident Supervision is internally evaluated by the trainee annually, on a rotational basis and in the annual ACGME Surveys.

Teaching students, peers and other healthcare professionals, occurs with graduated supervision and feedback from supervising Faculty.



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Active participation in departmental or institutional patient safety, quality assurance and quality improvement activities is assigned to teams under the graduated supervision of Faculty.

Faculty are scheduled and available for appropriate supervision levels according to the requirements for the scheduled Residents.

Guidelines:

1. Residents are to communicate with supervising Faculty when circumstances mandate regarding a finding that will impact patient care either compromising morbidity, function of a vital organ or limb or endangers patient life. In addition, it is the policy of the Department of Radiology that Residents contact Faculty immediately when a significant finding is noted and appropriate documented communication is conveyed to patient care team.
2. Residents are to communicate with Faculty upon the request of a healthcare provider in the event of any discrepancy of opinion regarding Residents preliminary interpretation, case management, professionalism or interpersonal and communications skills issues and facilitate process to ensure opportunity for communication, consultation, and clarification of information.
3. All parties have access to one other's schedules and contact information. All call schedules are available via QGenda to subscribers or through hospital operators.
4. Safeguards exists for coverage when unexpected changes in patient care may occur due to circumstances such as resident illness, fatigue, or emergency assuring optimal communication with Faculty.

Approval authority:

This policy is approved by the Chairman of the Department of Radiology

Responsibility and Revisions:

The Chairman of the Department of Radiology and the Radiology Residency Program Director will review and initiate revision on this policy when necessary.

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Signatory approval on file by:	Jesus E. Calleros-Macias, M.D. Acting Chair of Radiology Texas Tech University Health Sciences Center El Paso 