

TULANE UNIVERSITY SCHOOL OF MEDICINE

1430 Tulane Avenue, New Orleans, Louisiana 70112

RESIDENCY CONTRACT FOR A.Y. 2007-2008

I, the undersigned, do hereby accept appointment as a Resident in year ____ of a ____ year program in the Department of _____, Tulane University School of Medicine; commencing on ____ and ending _____. Level of training will be at the House Officer level ____; salary for this level is \$_____ per year plus fringe benefits. Sick leave, parental leave, educational leave, and vacation time will be according to the guidelines of the Tulane University School of Medicine and the Department. In those cases where in order to fulfill board requirements a resident must make up time missed due to medical or other authorized leave, the resident will be paid for all hours worked.

It is understood that training, research, teaching and clinical assignments will be approved by the Chairman of the Department of _____. Duty hours will be consistent with institutional and program requirements based on educational rationale and patient need, including continuity of care with supervision available at all times. Liability insurance will be provided through the Tulane Self-Insurance Trust Program: \$1,000,000; and the Louisiana Patient Compensation Fund-Act 817 Qualification, or by the State or Federal plans when rotating through their supported facilities.

It is understood that as the position of housestaff physician involves a combination of supervised, progressively more complex and independent patient evaluation and management functions and formal educational activities, the competence of the housestaff physician is evaluated on a regular basis. The program maintains a confidential record of the evaluations.

It is understood that the Residency Program in the Department of _____ is for ____ years of training. However, Tulane University School of Medicine or any of the participating hospitals reserves the right to dismiss me at any time during the residency according to Tulane's Institutional Policies for selection, promotion, evaluation, dismissal and supervision. Renewal of this contract is dependent upon satisfactory performance as described in Tulane's Institutional Policies. I understand that the due process of the right of appeal and a grievance procedure is available to me. Procedures are also available to redress grievances including gender or other forms of harassments.

It is understood that counseling and supportive services will be made available, as well as information regarding security procedures. Health, life and disability insurance will be provided unless specifically refused. Dental, as well as family medical insurance coverage may be purchased for eligible dependents through payroll deduction. Free parking will be available while on rotation in the Tulane University Medical Center area (TMC, VA, MCLNO). Sleeping quarters and meals will be provided while on-call. Lab coats and beepers will be available at no charge.

It is understood that moonlighting is permitted only with written permission of the program director and within the guidelines of the moonlighting policy.

Should any affiliated hospital close or reduce their funding of residency slots during a residency training program, every attempt will be made to replace those training slots at another affiliated institution and to locate funds for completion of the academic year. Should that not be available and it is necessary to reduce the number of residency positions in a given department, the affected house officers will be informed as early as possible. Assistance will be provided in finding a training position at another hospital.

Additionally, if a residency training program is closed or reduced in size, the affected house officers will be notified as soon as possible and assistance will be provided to locate another training program for them.

It is understood that if I am not a U.S. citizen, in the event my visa terminates or expires for any reason, this residency contract automatically expires.

RESIDENT PHYSICIAN RESPONSIBILITIES

Resident physicians are expected to:

1. Meet the qualifications for resident eligibility outlined in the Essentials of Accredited Residencies in Graduate Medical Education in the AMA Graduate Medical Education Directory.
2. Comply with Tulane's verification procedures, which includes:
 - a) Documentation of identity and right to work.
 - b) Proof of compliance with immunization policy.
 - c) Completion of the Tulane application for appointment to the housestaff, listing all information requested and returning the document in a timely manner prior to the hiring date so all information can be verified including medical school and previous residency training prior to beginning patient responsibilities.
3. Obtain a valid, unrestricted Louisiana State Medical license, except for PGY I's, who must apply for and obtain intern registration from the Louisiana State Board of Medical Examiners.
4. Develop a personal program of self-study and professional growth under the general supervision of appropriately credentialed attending teaching staff.
5. Participate in safe, effective and compassionate patient care under supervision, commensurate with their level of advancement and responsibility.
6. Participate fully in the educational activities of their program and, as required, assume responsibility for teaching and supervising medical students, and other residents and participate fully in institutional orientation and at least 50% in education programs and other activities involving the clinical staff.
7. Refrain from employment which interferes with or is not related to the residency training program, as judged by the Program Director.
8. Participate in institutional programs and activities involving the medical staff and adhere to established practices, procedures, and policies of the Institution.

9. Develop an understand of ethical, socioeconomic and medical/legal issues that affect graduate medical education and participate in institutional committees and councils, especially those that relate to patient care review activities, quality assurance, and apply cost containment measures in the provision of patient care.
10. Charts, records, and/or reports will by kept up to date and signed at all times. Compensation and/or certificate of completion may be withheld pending completion of any outstanding paperwork.
11. Follow the rules, regulations, policies and procedures of Tulane University School of Medicine and its affiliated institutions that relate to graduate medical education.

I accept the appointment outlined above and agree to all rules and regulations of Tulane University School of Medicine and affiliated institutions to which I am assigned. I agree to discharge all the duties of a resident as determined jointly by the affiliated institutions and the respective directors of training programs at Tulane University School of Medicine.

Date

Signature of Resident Physician

ACCEPTED:

Date

Print Full Name

Date

Program Director

Date

Department Chairman

Date

Associate Dean
Graduate Medical Education