

Summary of Resident Policies

The following is a summary of selected Mayo School of Graduate Medical Education (MSGME) Policies.

1. Resident Responsibilities

The position of resident physician entails the provision of care commensurate with the resident physician's level of advancement and competence, under the general supervision of appropriately privileged attending teaching staff. This includes:

- Participation in safe, effective and compassionate patient care.
- Development of an understanding of the ethical, socioeconomic and medical/legal issues that affect graduate medical education and of how to apply cost containment measures in the provision of patient care.
- Participation in the educational activities of the training program and, as appropriate, assumption of responsibility for teaching and supervising other residents and students; participation in institutional orientation and education programs; and participation in other activities involving the clinical staff.
- Participation in institutional committees and councils to which the resident physician is appointed or invited.
- Performance of these duties in accordance with the established practices, procedures and policies of the institution, and those of its programs, clinical departments and other institutions to which the resident physician is assigned, including, among others, state licensure requirements for physicians in training where these exist.

2. Duration of Appointment and Conditions of Continuation

Individuals are enrolled in MSGME after they have accepted an official offer of appointment from an MSGME Dean/Associate Dean and have met the contingencies stated in the appointment letter and completed applicable registration, licensure, and visa requirements. The appointee must also have satisfactory completion of a qualified medical school as well as proof of the legal right to work as required by federal law. Annual continuation of training to subsequent years will be dependent upon satisfactory progress in education, performance of all duties, and compliance with MSGME policies.

3. Confidentiality

All members of the Medical Center have an obligation to conduct themselves in accordance with Mayo's Confidentiality Policy and hold in confidence all information concerning patients, employees and business information. Confidential information includes all material, both paper-based and electronic, related to patient care and operation of the Medical Center. Any carelessness or thoughtlessness in revealing any confidential information, leading to the release of such information, is not only wrong ethically but may involve the individual and Mayo legally. Unauthorized access, use or release of any and all confidential information at Mayo Medical Center may be cause for immediate dismissal.

4. Licensure

All appointments require an individual to have successfully matriculated from an approved Medical School. Prior to the first day of training in MSGME, residents must obtain either a valid medical license or must be registered with the Medical Licensing Board as is applicable under the laws of the State. All residents/fellows are required to obtain and maintain the appropriate medical license while enrolled in MSGME. Failure to meet applicable eligibility requirements without delay and to obtain and maintain a residency permit followed by a medical license will result in one or more of the following:

- Delay or revocation of appointment;
- Preclude advancement to the next postgraduate level;
- Preclude continuation in the residency program;
- Disciplinary action for non-academic deficiency.

Appointees who fail any step of USMLE three times will not be appointed to, or allowed to, remain in MSGME.

5. Visa Sponsorship Policy

Mayo supports ECFMG J-1 visa sponsorship for residents appointed to MSGME. In limited circumstances that benefit the institution, the H-1B visa may be used.

To be ECFMG certified for the J-1 visa, the individual must:

- Pass USMLE step 1
- Pass USMLE step 2 CK (Clinical Knowledge)
- Pass USMLE step 2 CS (Clinical Skills)
- Have graduated from a recognized medical school and have a credentialed medical school diploma

The above steps must be completed to begin a training program. USMLE Step 2 CS must be taken by December 31 of the year prior to the NRMP match in order to be eligible to participate.

To use the H-1B visa, the individual must complete the three steps above and must also:

- Pass USMLE step 3, and
- Be registered or licensed with the Minnesota Board of Medical Practice before completing the program.

Because the J-1 visa is the standard visa at Mayo for International Medical Graduates in medical residencies, exceptional use of the H-1B visa requires internal review and approval of the MSGME Dean.

Additional information is available in the [MSGME Comparison of H-1B and J-1 Visa Categories](#) statement.

6. Drug Screening

All residents will be required to complete and pass a drug screening test as a condition of their appointment to MSGME.

7. Background Studies

Criminal background checks are required for all Mayo residents and fellows. If an individual is found to be convicted of serious criminal offenses such as assault, criminal sexual conduct, etc. that disqualify the individual from positions with direct patient contact, the individual becomes ineligible for appointment or continuation of appointment in MSGME.

8. Stipend and Benefits

[Stipend level](#) will be increased annually on the anniversary date of the commencement of the residency based on the continuation in the program at the next level of training. The increase will be dependent on satisfactory performance of assigned duties by the resident and satisfactory evaluations by the program director and faculty.

Mayo offers a choice of health plans which vary in contributions made by the resident/Mayo and in coverage amounts. Further benefit information including, but not limited to, disability and life insurance is available on the following web pages: Stipend and Benefits: [Jacksonville Programs](#), [Rochester Programs](#), [Scottsdale Programs](#)

9. Vacation Policies

The annual vacation allowance is 15 days (3 weeks) for all residents. Weekends and Mayo holidays are not charged as vacation time. Vacations must be approved by the appropriate department/program representative. A maximum of five vacation days may be reimbursed or may be carried over to the next year with program director approval (contingent upon continued enrollment within the same program and upon accreditation/certification requirements). The use of vacation days during the final week of training is discouraged.

10. Leave of Absence and Short Term Disability

Residents may request a leave of absence. All leave requests (to include emergency, family medical/parental leave, personal, and military) must be approved by the program director or designee, in compliance with MSGME policy. Requests for leave of absence greater than one week must be approved by MSGME.

If residents become ill, stipend and benefit coverages continue for up to three months per year under Mayo's short-term disability policy. Absences due to illness must be recorded and submitted to the appropriate education coordinator.

11. Policy on Effect of Leave for Satisfying Completion of Program

Each training program determines the total absence time permitted during each year of the program. Where applicable, the total absence time permitted will be in accordance with the certification requirements of the specialty board. Absence in excess of the designated time may extend the resident's training time. Questions should be directed to the specific program director in advance of the resident's planned absence.

12. Professional Liability Insurance and Tail Coverage

Mayo Clinic will provide professional liability insurance for the resident's activities in MSGME regardless of when the claim arises. It is expected that the resident will assist and cooperate with the institution in the defense of any claim that may be brought by any patient attended by the resident - even if the claim or suit arises after the completion of training.

Mayo Clinic professional liability protection is not extended to a resident engaged in professional activities that are not part of a Mayo program (e.g., moonlighting). However, if the resident conducts charitable or public service professional activities with the approval from the appropriate department chair or program director and does not receive payment outside of Mayo, Mayo's professional liability protection may be provided if the sponsoring institution does not supply such coverage.

13. Counseling, Medical, Psychological Support Services

Mayo's Employee Assistance Program is available to MSGME residents. This program provides confidential assistance for personal problems. Trained employee assistance coordinators offer information, assessment and short-term counseling, as well as referral for special situations or longer-term needs.

The service is free, and no record of contact is placed in the student's medical records, Health Service records or student file. All contact is kept confidential, except as required by law or in situations deemed potentially life-threatening by the employee assistance coordinator.

14. Policy on Physician Impairment and Substance Abuse

Mayo regards alcohol or chemical dependency as illnesses that can be medically treated. Professional assistance and referral resources are available in the online MSGME policy manual. Once started in the program, resident appointments will not be jeopardized solely for requesting help for the diagnosis and treatment of a drug dependency illness. Such matters will be decided on the merits of each individual's performance in the same manner as for any individual with or without other health problems.

If a resident is determined to be unable to perform satisfactorily and safely in the program at any time, a colleague or supervising faculty member will escort the resident to the nearest employee health service location for an immediate consultation with one of the Employee Health Service physicians. The resident will be relieved of all patient care responsibilities until this evaluation is complete. Resumption and continuation in the residency program will be based on the resident's ability to satisfactorily perform responsibilities and requirements.

Resident entry into a program is contingent upon drug or alcohol testing results as defined by Mayo site.

15. Conditions for Sleep Rooms, Meals, Laundry

Each hospital provides adequate on-call rooms. Residents who are required to remain in the hospital for on-call service will receive a meal allowance for use in the hospital cafeterias up to established dollar limits. In addition, residents may receive a meal allowance when special on-duty schedules require the resident's presence in the hospital beyond usual duty hours. Food is available in resident lounges during hours when hospital cafeterias are not open. Scrub suits are provided and laundered for residents who are on-call overnight in the hospital or who are assigned to departments that wear scrub suits in the course of their usual activities.

16. Policy on Professional Activities Outside of Program

Residents are not required to engage in moonlighting. Moonlighting is permitted for those who hold a valid license to practice medicine (except for international medical graduates as defined below). Residents must obtain a prospective written statement of permission from their program director that must be made part of the resident's file. Time spent moonlighting must not interfere with the resident's reading and studying, family time, sleeping, relaxation, and most importantly, one's program requirements and academic performance at Mayo. Under no circumstances should patient care at Mayo be jeopardized or infringed upon because of resident moonlighting activities. The resident's performance will be monitored for the effect of these activities upon performance. Adverse effects may lead to withdrawal of permission. MSGME will not assume responsibility for credentialing the resident nor assume any liability related to extramural moonlighting activities. Residents on an H-1B visa or a J-1 visa sponsored by ECFMG are not permitted to moonlight.

Other professional activities outside the training program, should conform to guidelines set forth in Mayo Clinic's Industry Relations policy. Off-campus, industry-sponsored events are appropriate to attend only if they serve some educational function that is not related to the sponsoring company. Modest hospitality such as meals or other refreshments associated with the event may be accepted as

long as the event includes a structured educational component (e.g., formal speaker, demonstration, etc.). Educational programs must be substantial in content and not pro forma. Industry-sponsored social events with no structured educational component are not appropriate.

17. Disciplinary Procedure

Appointees to MSGME may be placed on probation or dismissed for significant, documented deficiencies. An academic or non-academic deficiency could result in either a formal warning or probation, depending on the judgment of the faculty as to the type and degree of the deficiency. Both Formal Warning and Probation include a remedial plan to improve performance. The warning is removed from the individual's MSGME record if the issues are fully remediated. Probation and/or dismissal will likely result if unsatisfactory performance continues. A record of the probation and outcome remains in the individual's MSGME record. The resident has the right to appeal the decision of the program if dismissed. Due process is outlined in the MSGME Probation and Dismissal policy and is closely monitored. An Ombudsperson is available to residents during the disciplinary process.

18. Grievance Procedures

The resident and his or her program director should make every reasonable effort to resolve any conflicts, problems, or disagreements that arise related to the application of Mayo's policies and procedures. In instances where the resident is uncomfortable taking a complaint to his or her Program Director, the resident should contact his/her assigned Advisor, the Division/Department Education Chair, the Division/Department Chair, the MSGME Administrator, the MSGME Associate Dean, the Mayo Fellows Association, or the MSGME Ombudsperson.

Resident allegations of academic misconduct by faculty should be directed to the Department Chair or an MSGME Associate Dean. The MSGME policy entitled Faculty Misconduct Allegations will be followed.

The MSGME appeal policy, as outlined in the Probation policy, is available to individuals with grievance outcomes.

19. Equal Opportunity and Affirmative Action

Mayo Clinic seeks and selects persons for appointment, employment or admission - and to train, advance, promote, transfer and compensate such persons - on the basis of individual capability, potential or contribution to the programs and goals of the institution. Mayo Clinic makes these selections and subsequent personnel decisions without regard to age, disabilities, marital status, national origin, race, religion, gender, sexual orientation, or Vietnam era veteran's status. Furthermore, Mayo Clinic supports and observes stated policies of the State and Federal governments that preclude discrimination.

20. Policies on Mutual Respect and Harassment

Disrespectful behavior of any kind - sexual or any other form, ranging from inappropriate humor and subtle hints to overt acts, threats, or physical contacts - will not be tolerated. An individual who experiences intimidation or harassment is asked to report the incident using the reporting process outlined in the MSGME Sexual Harassment policy. It is the responsibility of residents who believe they have been intimidated or harassed to report such behavior so that the behavior can be investigated and appropriate action taken.

Residents subjected to unwelcome sexual conduct or lack of mutual respect should inform the perpetrator that the conduct is considered offensive and must stop. If the response of the perpetrator is unsatisfactory, the resident should report the matter to any of the following: Program Director; MSGME Administrator, Associate Dean/Director, or Dean; Diversity/Mutual Respect Office; or Department of Human Resources. This policy also applies to residents who have witnessed alleged harassment or have had incidents of alleged harassment reported to them. An investigation will follow and appropriate

action taken after review by designated members of Administration or the educational program's governing committee.

21. Adverse Accreditation Actions, Residency Closure/Reduction Policy

In accordance with ACGME requirements, MSGME will inform residents in writing of confirmed adverse accreditation actions taken by the Accreditation Council for Graduate Medical Education. If Mayo should begin the process of closing a residency training program, the residents will be informed four months or more before the end of their appointment, or as early as possible if the closure occurs within four months of the appointment end. MSGME will make every effort to enable residents in the program to complete their education or assist the residents in enrolling in an ACGME-accredited program in which they can continue their education.

22. Duty Hours

Fatigue can negatively affect patient care, resident education, and resident well-being. MSGME has established policies regarding resident duty hours and supervision to assure full compliance with Accreditation Council for Graduate Medical Education (ACGME) requirements and to avoid situations where patient care and resident welfare are compromised by excessive service obligations.

Duty hours are defined as all clinical and academic activities related to the residency program, i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences. Duty hours do not include reading and preparation time spent away from the duty site.

1. Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities.
2. Residents must be provided with 1 day in 7 free from all educational and clinical responsibilities, averaged over a 4-week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, educational, and administrative activities.
3. In-house call must occur no more frequently than every third night, averaged over a four-week period.
4. Continuous on-site duty, including in-house call, must not exceed 24 consecutive hours. Residents may remain on duty for up to six additional hours to participate in didactic activities, transfer care of patients, conduct outpatient clinics, and maintain continuity of medical and surgical care as defined in RRC Specialty and Subspecialty Program Requirements.
5. Adequate time for rest and personal activities must be provided. This should consist of a 10-hour time period provided between all daily duty periods and after in-house call.

MSGME programs monitor duty hours carefully. Detailed information about ACGME requirements regarding resident duty hours is available on the [ACGME web site](#) under the heading "resident duty hours."

23. Evaluation

Each MSGME program completes multiple evaluations:

- **Evaluation of Residents:** Residents are evaluated at the end of each rotation or assignment, or each quarter, by faculty with whom they have been assigned. These evaluations are recorded in the MSGME office. If desired, the resident may review the evaluation with his or her Adviser, Program Director, the Associate Dean or an MSGME representative. Unsatisfactory performance may result in warning and/or probation and/or termination.
- **Evaluation of Faculty:** Residents must be given the opportunity to evaluate faculty teaching at the conclusion of each assignment. Faculty evaluations must be reviewed by the training Program Director and Department Chair. The evaluations should include a review of their

teaching abilities, commitment to the educational program, clinical knowledge, and scholarly activities.

- **Program Evaluation:** All programs must evaluate the educational effectiveness of the residency program at least annually in a systematic manner. Representative program personnel (at least the program director, representative faculty, and one resident) must be organized to review program goals and objectives, and the effectiveness with which they are achieved. In the evaluation process, the group will take into consideration written comments from the faculty, the most recent internal review report of the GMEC of the sponsoring institution, and the residents' confidential written evaluations. Written minutes of these meetings will be maintained by the program.
- **Final Evaluation:** The Program Director will provide a final summative evaluation for each resident who completes the program. This evaluation must include a review of the resident's performance during the final period of education, and should verify that the resident has demonstrated sufficient professional ability to practice competently and independently. The final evaluation will be maintained as a part of the resident's permanent MSGME record.

24. Infection Control

Infection control policies are designed to reduce the risk of infection among patients, employees and visitors. All residents are expected to comply with these policies, including hand washing, standard (universal) precautions, isolation procedures, and other prevention and control measures as outlined in the Infection Control Manual or as directed by the Medical Director of the Infection Control Program. Compliance with Employee Health Services guidelines, education, and training requirements, and other applicable governing standards such as Occupational Safety and Health Administration (OSHA), Department of Health Reportable Diseases, etc. is also expected.

25. Case Documentation

Documentation of cases and procedures, as mandated by Residency Review Committee (RRC) and program essentials, is a requirement of the MSGME appointment. Residents who do not maintain accurate and up-to-date case documentation will not advance to the next level of training or be allowed to complete their residency program until compliance is achieved.

26. Certificate

Upon satisfactory completion of the training program, the resident will be eligible for an MSGME certificate and an alumni certificate. Mayo does not impose restrictive practice covenants upon its graduates.

For questions or further details regarding these policies, contact Mayo School of Graduate Medical Education at msgme@mayo.edu.

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Visa Categories

Purpose

The Mayo School of Graduate Medical Education considers it the personal responsibility of the resident to obtain and maintain his/her valid visa status. You may contact the international personnel advisor in the International Personnel Office (IPO) (extension 4-2915) for help and advice. The International Personnel Office follows changes in immigration regulations that pertain to the graduates of foreign schools appointed to Mayo educational programs. In addition, this office serves as an interface with the U.S. Department of State (DOS), the United States Citizenship and Immigration Service (USCIS), Department of Labor (DOL) and the Educational Commission for Foreign Medical Graduates (ECFMG).

Policy

Mayo Clinic's approved visa policy supports the ECFMG J-1 visa category for residency and fellowship training. Mayo will support an H-1B visa in the following exceptional situations:

1. U.S. Medical School Graduates from accredited medical schools
2. ECFMG is not in a position to sponsor a J-1 visa – Program is not ACGME accredited or ABMS recognized
3. International Medical Graduate is currently in U.S. in H-1B classification, enrolled in graduate medical education at another institution
4. Competitive reasons in exceptional circumstances

Comparison of H1B and J1 Visa Categories

Under Current Department of State and United States Citizenship and Immigration Services regulations for Non-Immigrants Pursuing Graduate Medical Education

J1 Visa	H1B Visa
<p>Exchange visitor status is used to bring individuals to the United States for <u>education/training</u> (not employment). Any international medical graduate coming to the U.S. in J1 classification to be enrolled in a clinical training program must:</p> <ol style="list-style-type: none"> 1. pass USMLE Step 1 2. pass USMLE Step 2 CK 3. pass USMLE Step 2 CS <p>These exams must be taken by 12/31 of the year prior to the NRMP in order to be eligible to participate the match</p> <ol style="list-style-type: none"> 4. meet the medical credentials of the country where medical degree is obtained. 5. have a valid ECFMG certificate on file at Mayo prior to beginning training.. 	<p>This classification is used for temporary "specialty occupation" workers and trainees. Non-immigrant physicians are eligible to obtain an H1B visa if they:</p> <ol style="list-style-type: none"> 1. are certified by ECFMG 2. have passed the FLEX or Parts I, II and III of NBME or steps 1, 2 CK, 2 CS & 3 of USMLE <p>have competency in oral & written English or are graduates of an accredited school of medicine (schools so accredited include those in the U.S. and Canada).</p>

<p>6. pledge to return to the home country for a 2-year period upon completion of training.</p>	
<p>Graduates of accredited Canadian medical schools do not need ECFMG certification. However, if CMG are in need of a non-immigrant visa, they will need to obtain J1 visa sponsorship through ECFMG.</p>	
<p>Applications are filed with ECFMG through the International Personnel Office to obtain the DS-2019 form (certificate of eligibility for the J1 exchange visitor visa).</p>	<p>Petitions are filed by Mayo (after Department of Labor certification is obtained) with the USCIS to obtain approval of H1B visas.</p>
<p>ECFMG will sponsor ACGME accredited training for the time it takes to be board eligible. ECFMG will also sponsor training programs that are recognized by the ABMS. Total Maximum stay cannot exceed 7 years. \ Obtaining permission to exceed the 7 year limit is extremely difficult and not generally pursued by Mayo. Approval is needed from both ECFMG and the United States Department of State.</p>	<p>USCIS will approve classification for a maximum of six years. However, if an individual has filed for permanent immigrant status or labor certification with the Department of Labor before the start of the 6th year in H1B classification, the immigration service will grant extensions beyond 6 years.</p>
<p>Exchange visitors can participate in off-campus rotation and can rotate to Mayo's group practices if these are part of their program. NB: Since EnhanceMed, Medical Professional Services is a separate legal entity, for immigration purposes it would not constitute part of their program.</p>	<p>Individuals in H1B classification cannot participate in off-campus rotations. H1B visa holders can rotate to the group practices only if the rotation is required to meet requirements for board eligibility and is not available at the home program site. In this instance, IPO must be contacted as a separate petition needs to be filed. Three to four months is required for this process.</p>
<p>J1 dependents (J2) can obtain work authorization</p>	<p>H1B dependents (H-4) are not eligible for work authorization.</p>
<p>Exchange visitors cannot moonlight in J1 classification</p>	<p>Individuals in H1B classification are not allowed to moonlight on petitions filed by Mayo.</p>
<p>Exchange visitors must return to country of last permanent residency upon completion of training program for two years before eligible to return to U.S. in H or L visa status or as a permanent immigrant.(including those married to U.S. citizens).</p>	<p>Is possible to adjust to another visa category; not subject to two-year home resident requirement.</p>
<p>Subject to federal and state income tax. Will also be subject to FICA tax once exchange</p>	<p>Subject to full U.S. taxes. Taxed on worldwide income.</p>

visitor meets the "substantial presence" test.	
\$200 ECFMG processing fee.	Immigration base filing fee is \$190.
Application time to process is approximately three months.	Application time to process H1B is approximately 4 months. USCIS does offer Premium processing. Contact IPO for more details.

Related References

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