INTERNAL MEDICINE HOUSESTAFF PROCEDURE SUPERVISION

| LEVELS OF SUPERVISION | | | | | | | |
|--|--|--|----|--|----|--|--|
| The trainee will not perform | Supervising physician physically present with resident during key portions of patient interaction (Direct) | Supervising physician not present or providing concurrent supervision, but immediately available to provide guidance and direct supervision (Indirect) | | Supervising physician available to provide review & feedback after care is delivered (Oversight) | | | |
| NA | 1 | 2 | | | 3 | | |
| CORE PROCEDURES | | R1 | RZ | 2 | R3 | | |
| Admit patients to service | | 2 | 2 | | 2 | | |
| Complete H & P | Complete H & P | | 2 | | 2 | | |
| Treat and Manage | Treat and Manage | | 2 | | 2 | | |
| Make referrals and req | Make referrals and request consultations | | 2 | | 2 | | |
| Provide consultations within the scope of his/her privileges | | 2 | 2 | | 2 | | |
| Use all skills normally learned during medical school or residency | | 3 | 3 | | 3 | | |
| Render any care in a lif | 1,3 | 1,3 | | 1,3 | | | |
| Supervise AHP on serv | 2 | 2 | | 2 | | | |
| SEDATION | | | | | | | |
| Local Anesthesia | | 1 | 2 | | 2 | | |
| Moderate Sedation | Moderate Sedation | | 1 | | 1 | | |
| GENERAL INTERNAL MEDICINE | | | | | | | |
| Abscess drainage | | 1 | 2 | | 2 | | |
| Anoscopy | | 1 | 2 | | 2 | | |
| Arterial Blood gas | | 1 | 2 | | 2 | | |
| Arterial Line Placement | | 1 | 2 | | 2 | | |
| Arthrocentesis | | 1 | 2 | | 2 | | |
| Aspirations and injections, joint or bursa | | 1 | 2 | | 2 | | |
| Bladder catheterization | 1 | 2 | | 2 | | | |
| Bronchoscopy | 1 | 1 | | 1 | | | |
| Bone marrow aspiration | | *1 | *1 | | *1 | | |
| Bone marrow needle b | *1 | *1 | | *1 | | | |

| Cardioversion, emergent | 1,3 | 1,3 | 1,3 |
|---|-----|-----|-----|
| Cardioversion, electives | 1 | 1 | 1 |
| Central venous catheterization | 1 | 2 | 2 |
| ECG interpretation panel, emergent | 1,3 | 1,3 | 1,3 |
| ECG interpretation panel, elective | 2 | 2 | 2 |
| Exercise treadmill test | 1 | 2 | 2 |
| ETT with thallium | 1 | 1 | 1 |
| Excisions/Skin biopsy | 1 | 2 | 2 |
| Feeding tube placement (nasal or oral) | 1 | 2 | 2 |
| Rigid Proctoscopy | 1 | 1 | 1 |
| Laryngoscopy | 1 | 1 | 1 |
| Lumbar puncture | 1 | 2 | 2 |
| Pacemaker insertion, transvenous; temporary | 1 | 1 | 1 |
| Pap smear | 1 | 2 | 2 |
| Paracentesis | 1 | 2 | 2 |
| Pericardiocentesis, emergent | 1,3 | 1,3 | 1,3 |
| Suturing | 1 | 2 | 2 |
| Tendon/joint injections | 1 | 2 | 2 |
| Thoracentesis | 1 | 2 | 2 |
| Tracheal intubation, emergent | 1,3 | 1,3 | 1,3 |
| Tube thoracostomy | 1 | 1 | 1 |
| Venipuncture | 2 | 2 | 2 |
| Peripheral IV placement | 2 | 2 | 2 |

All procedures are discussed with the attending prior to proceeding. Attending Physician (or designated attending) is to be available by phone at all times.

*= fellow in training may serve as supervisor

Revised July 2020

All procedures are discussed with the attending prior to proceeding.

Attending Physician (or designated attending) is to be available by phone at all times.

As required by ACGME, the program has identified below (with a "1") when the *physical presence* of a supervising physician is required.

^{*=} fellow in training may serve as supervisor