### **Guidelines for WHC Clinic**

## Reviewing your schedule

Residents are expected to review their clinic schedule (when the tentative is first published) against their rotation responsibilities. The final schedule will be reflected on AMION. Residents are ultimately responsible for their schedules and are expected to notify the clinic scheduler about errors eg:

- If you are double-booked for both rotation and clinic responsibilities
- Post call from an inpatient rotation and booked in clinic.

## Once the final schedule is published, there are no changes made to the schedule except in very rare cases.

#### Late arrival to clinic

Residents are expected to arrive on time to their clinic team area, check in and be prepared to begin work *Residents are expected to call the program coordinator or designee if they anticipate late arrival to clinic*. Clinic session times are:

- 8:00AM- 12 N for primary clinic
- 8:00AM- 12 N for Direct Care
  - o Direct care schedules are found on AMION and not on EPIC
- 1:00-5:00 PM for afternoon clinic
- 1:00-5:00 PM Direct Care afternoon clinic
- 5:30-8:00 PM for evening clinic

# Residents late to clinic without notification to the program coordinator /Mindy (not a clinic team member or Angee) will:

1st time: receive a warning email from the program coordinator

2<sup>nd</sup> time: be required to attend a formal disciplinary meeting with their advisor

3<sup>rd</sup> time: loss of a ½ day of vacation time or be required to work a Saturday morning session on the Inpatient service at the discretion of the Program Director

### Residents are expected to remain in their team centers during the duration of the clinic session.

• It should not be the expectation that the MAs page residents to come to the team centers to see patients during the session. This disrupts the clinic flow and creates additional work in a system that is already resource limited.

## Residents must check out with a faculty preceptor prior to leaving the clinic. Debriefing activities could include:

- Closing the loop on open labs, test, diagnoses
- Review of any patient encounter or any diagnostic challenge
- Review of residents' performance of procedures. Ensure that faculty preceptor completes independence of procedure form if applicable
- Determine if other residents are running behind and may need help.

Residents needing to leave during the session to attend a delivery must notify the program coordinator AND have the permission of the clinic preceptor.

Residents may not leave if they are working in Direct Care.