

I. Policy on Resident Eligibility and Selection *Revised 9/13/2023*

I. References

In accordance with Section IV.B of the ACGME Institutional Requirements, the Sponsoring Institution must have written policies and procedures for resident recruitment, selection, eligibility, and appointment consistent with ACGME Institutional and Common Program Requirements, and Recognition Requirements (if applicable), and must monitor each of its ACGME-accredited programs for compliance.

II. Definitions

Throughout this Policy and the School of Medicine's additional GME Policies and Procedures, the term "resident" collectively refers to both residents and fellows and "residency program" or "School of Medicine residency program" collectively refers to residency programs and fellowship programs.

III. Policy

A. Resident Eligibility

1. To be eligible for appointment to an ACGME-accredited residency program sponsored by Tulane University School of Medicine (the "School of Medicine") applicants must meet one of the following qualifications:
 - a. Be a graduate from a medical school in the United States or Canada that is accredited by the Liaison Committee on Medical Education (LCME); or,
 - b. Be a graduate from a college of osteopathic medicine in the United States or Canada that is accredited by the American Osteopathic Association (AOA); or,
 - c. Be a graduate from a medical school outside of the United States or Canada and meet one of the following additional qualifications:
 - i. Holds a currently valid certificate from the Educational Commission for Foreign Medical Graduates (ECFMG) prior to appointment; or
 - ii. Holds a full and unrestricted license to practice medicine in the state of Louisiana, as issued by the Louisiana State Board of Medical Examiners (LSBME).
2. International medical graduates who are not United States citizens must also hold a current, valid J-1 Visa sponsored by the ECFMG. In general, the School of Medicine does not sponsor work visas (H1-B) for graduate medical education. The School of Medicine makes limited exceptions to this policy. A program seeking to sponsor an international medical graduate through the H1-B work visa process must obtain the written approval of the DIO.
3. Subject to more specific requirements that may be set by an ACGME Review Committee applicable to the program, all prerequisite post-graduate clinical education required for initial entry or transfer into an ACGME-accredited residency program needs to be completed in ACGME-accredited residency programs, AOA-approved residency programs, Royal College of Physicians and Surgeons of Canada (RCPSC)-accredited or College of Family Physicians of Canada (CFPC)-accredited residency programs in Canada, or in residency programs with ACGME International (ACGME-I) Advanced Specialty Accreditation.

4. Upon matriculation, the residency program must receive verification of each resident's level of competency in the required clinical field using ACGME Milestones, or, if permitted by the program's ACGME Review Committee, using CanMEDS, or ACGME-I Milestones evaluations, from the prior training program. The ACGME Review Committee for each residency program may further specify prerequisite postgraduate clinical education.
5. Physicians who have completed a residency program that is not accredited by the ACGME, AOA, RCPSC, CFPC or ACGME-I (with Advanced Specialty Accreditation) may enter an ACGME-accredited residency program in the same specialty at the PGY-1 level and, at the discretion of the Program Director and with approval by the GMEC, may be advanced to the PGY-2 level based on the ACGME Milestones evaluations of the residency program. This section of the Policy applies only to entry into a residency program in those specialties for which an initial clinical year is not required for entry.
6. To the extent permitted by a residency program's Review Committee, an exceptionally qualified international graduate applicant who does not satisfy the eligibility requirements set forth above, may be accepted by a School of Medicine residency program in accordance with the conditions set forth in the ACGME's Common Program Requirements, including review and approval of the applicant's exceptional qualifications by the GMEC. Any exceptionally qualified international graduate applicant accepted through this exception shall have an evaluation of their performance by the residency program's Clinical Competency Committee within 12 weeks of matriculation

B. Resident Selection

1. School of Medicine residency programs select residents from among eligible applicants on the basis of their preparedness, aptitude, academic credentials, personal qualities consistent with excellence in medicine (e.g., motivation, honesty, and integrity), ability to communicate, demonstrated commitment to fostering equity, diversity and inclusion in medicine and ability to benefit from the education of the residency program.
2. School of Medicine graduate medical education residency programs participate in the National Residency Matching Program (NRMP or "the Match") in selecting residents, with the exceptions of the Urology and Ophthalmology programs, which select residents through the San Francisco Matching Program ("SF Match"), and the hematopathology, cytopathology, dermatopathology, and preventive medicine fellowships which do not have nationally organized residency match programs.
3. Applicant characteristics may be assessed by reviewing the applicant's Electronic Residency Application Service (ERAS) application or an equivalent application form. A residency program's review may include, but is not limited to, the following:
 - a. The applicant's letter of recommendation from the Dean of the applicant's medical school;
 - b. The applicant's letters of recommendation from medical school faculty;
 - c. The applicant's personal letters of recommendation;
 - d. The applicant's medical school transcript and grades;

- e. The applicant's National Board of Medical Examiners (NBME) (i.e., United States Medical Licensing Exam (USMLE)) or COMLEX scores;
 - f. The applicant's scholarly and community service record;
 - g. The applicant's noteworthy achievements, humanistic qualities, personal qualities consistent with excellence in medicine and qualities important to the desired specialty; and/or
 - h. The applicant's evaluation from those who interview the applicant on the date of their interview with the residency program.
4. The School of Medicine considers all candidates for graduate medical education regardless of race, sex, creed, nationality, national origin, disability, sexual orientation, or other legally protected status.
 5. Each residency program must provide a copy of the resident contract available in Appendix C to applicants during the interview process and programs must post a copy of the resident contract on their website. Information that is provided in the resident contract must include:
 - a. The terms, conditions, and benefits of appointment to the residency program, either in effect at the time of the interview or that will be in effect at the time of the applicant's eventual appointment;
 - b. Stipends, benefits, vacation, leaves of absence, professional liability coverage and disability insurance accessible to residents; and
 - c. Health insurance accessible to residents and their eligible dependents.
 - d. The additional information set forth in Section E of this Policy.
 6. Selected residents must obtain a license or permit through the Louisiana State Board of Medical Examiners and satisfy the LSBME background check standards in order to train in any School of Medicine residency program. Residents selected and training in a residency program that rotates at the Southeast Louisiana Veterans System (VA) may be required to go through additional background checks, as part of the onboarding process to rotate at the VA. Drug testing currently is not required by the School of Medicine or its participating sites.

C. Recruiting of Residents Outside of the Match

1. Programs that participate in an organized match (the Match and SF Match), are bound by the conditions of the agreement with that organization. No applicant to a residency program who is also a participant in an organized match can be accepted into a residency program at the School of Medicine outside of the terms of that match process even if the recruiting program does not participate in the respective organized match. Any deviations from matching procedures and practices may necessitate receiving a waiver from the organized match. Neither applicants nor programs may release each other from a binding match commitment.
2. Match rules govern when positions unfilled after the match process may be subsequently filled outside of the organized match. For the Match, unfilled positions may not be filled until the close of the Supplemental Offer and Acceptance Program (SOAP). Resident selection criteria, outlined in Section B, above, continue to apply to the selection of residents outside of a match program.

3. Hematopathology, cytopathology, dermatopathology, and the preventive medicine fellowship programs (or other programs which do not have a nationally organized match) must select fellows in accordance with the criteria outlined in Section B, above.
4. Program Directors who wish to add additional residents to their program through complement increases and/or vacancies in a program from a resident or fellow leaving during the time of the year when an organized match is not in effect (i.e., off-cycle) must send a formal request to the DIO, including the information outlined in the *Policy on Closure, Reduction, or Expansion*.
5. No resident may be enrolled in a training program outside of the above noted match procedures without prior approval of the DIO. A program, through the program's clinical department, that enrolls a resident off cycle or otherwise outside of a match (excluding fellows to programs without an organized match program), without the prior approval of the DIO will be financially responsible for the resident throughout the resident's training. Enrolling residents off cycle or outside of a match may result in a reduction in the program's match number for subsequent years or in a match violation.
6. Before accepting a resident who is transferring from another program, the Program Director must obtain written or electronic verification of previous educational experiences and a summative competency-based performance evaluation of the transferring resident, and Milestones evaluations upon matriculation.

D. Recruitment of Residents Between Residency Programs within the School of Medicine

1. When a position in a School of Medicine residency program is or will become vacant, the program may advertise the vacancy within the School of Medicine and its intent to fill the position, after receiving written approval from the DIO.
2. A resident who is interested, but who is currently under contract in another School of Medicine residency program, may only apply for the open position if the resident is not currently bound by a binding commitment through an organized match, such as the Match (or has received a written waiver from the matching program before applying).
3. The resident applicant must disclose to the Program Director for the recruiting program, any contractual obligation that currently exists to the resident's current School of Medicine residency program and disclose to the resident's current Program Director their intention to pursue the open position.
4. The Program Director and faculty from the recruiting School of Medicine residency program must not initiate, entice, or negotiate with a candidate from another School of Medicine program until the resident's current Program Director has given written approval for the program to contact the resident.
5. Before the resident can be offered the open position, a letter of intent to release the resident from their contractual obligation must be received from the current Program Director. The recruiting Program Director must also receive written or electronic verification of the resident's previous educational experiences and a summative competency-based performance evaluation prior to acceptance of the resident and the Milestones evaluations.

6. The start date for the resident in the new program must also be approved by the resident's current Program Director.
7. The DIO, or the DIO's designee, will serve as the mediator in any situation in which the School of Medicine Program Directors cannot reach an amicable resolution to the resident wishing to switch programs.
8. Failure to abide by the rules set forth in this section may result in a reduction in the program's complement for the following year.

E. Agreement of Resident Appointment/Contract

1. Residents who match to a School of Medicine residency program must be sent the resident contract that outlines the terms and conditions of employment as a resident at Tulane. This contract will be mailed to the applicant within two weeks of the match results. Residents employed outside of an organized match or off cycle will also receive the contract within two weeks of the program extending an offer for employment. The resident contract currently in effect is available in Appendix C.
2. The resident agreement of appointment/contract must comply with ACGME Institutional Requirements and the School of Medicine's requirements for employment. With the exception of the resident's start and finish date (the term of the contract), the resident contract cannot be modified without the written permission of the DIO, in consultation with the Office of General Counsel or GMEC as appropriate. The contract shall contain or provide a direct link to:
 - a. Resident responsibilities;
 - b. Duration of appointment;
 - c. Financial support for residents;
 - d. Conditions for reappointment and promotion, including criteria for non-renewal and non-promotion;
 - e. Grievance procedures and due process;
 - f. Professional liability insurance, including a summary of pertinent information regarding coverage;
 - g. Health insurance benefits for residents and their eligible dependents and disability insurance for residents;
 - h. Vacation, parental, sick, and other leave(s) of absence, compliant with all applicable laws, including timely notice of the effect of a leave on the ability of residents to satisfy requirements for program completion;
 - i. Information related to eligibility for specialty board examinations; and
 - j. School of Medicine policies related to resident clinical and educational work hours, moonlighting, resident wellness and assistance, harassment and accommodations for disabilities.
3. Each resident contract requires the signature of the resident, the Program Director, the departmental Chair, and the DIO, on behalf of The Administrators of the Tulane Educational

Fund. Payroll will not authorize the resident's first payment until the DIO has signed the resident's contract.

4. Contracts for residents are extended on a yearly basis. A new contract must be initiated each year.
5. In accordance with the *Policy on Non-Competition*, neither the School of Medicine nor any of its ACGME-accredited residency programs will require a resident to sign a non-competition guarantee or restrictive covenant.
6. The PGY status listed in the resident's contract shall be based upon the PGY level routinely held for that position in the program (e.g., a first-year resident will be paid as a PGY-1 status, a first-year cardiology fellow will be paid as a PGY-4 status, etc.) regardless of the resident's years of past training.

F. Residents Transferring to another Program Outside of the School of Medicine

1. In the event that a resident enrolled in a residency program sponsored by the School of Medicine transfers to a residency program outside of the School of Medicine prior to the resident's completion of their education at the School of Medicine, the resident's Program Director must provide to the accepting residency program, written or electronic verification of the resident's previous educational experiences and a summative competency-based performance evaluation and the Milestones evaluations.

G. Completion of USMLE or COMLEX Examinations

1. The USMLE Step 2 Clinical Knowledge (CK) and Clinical Skills (CS) tests or COMLEX equivalent(s) must be passed prior to matriculation into a residency program.
2. STEP 3 must be passed by December 31st of the PGY-2 year of residency training. Failure to pass STEP 3 by December 31st may result in a formal letter of non-renewal of contract for the upcoming academic year. This requirement also applies to residents beginning a School of Medicine residency program in program year two (PGY-2).
3. An applicant who has failed Step 2 or Step 3 (e.g., for international or transferring residents) of the USMLE more than three times, even if the examination is subsequently passed, is ineligible for enrollment in a School of Medicine residency program.
4. Any current School of Medicine resident who fails to take Step 3 by June 30th of the PGY-2 year of training will be placed on an immediate leave of absence without pay in accordance with the *Policy on Remediation, Suspension, Dismissal and Grievance*. The leave of absence will remain in effect until Step 3 has been taken and the Program Director receives the supporting documentation that the resident has taken and passed the exam. A revised start date will subsequently be determined.
5. Step 3 must be passed by December 31st of the PGY-2 year of residency training. Failure to pass Step 3 by December 31st may result in a formal letter of non-renewal of contract for the upcoming academic year.
6. No resident may advance into PGY-3 of training unless the resident has passed Step 3.

H. Resident Rotations Outside of the School of Medicine's Participating Sites

1. To provide additional educational experiences or assignments, residents may, occasionally, be permitted to rotate to a residency program outside of Tulane Medical Center and/or other School of Medicine participating sites. All external rotations must be approved by the resident's Program Director.
2. To receive training credit for external rotations, the rotation must be at an ACGME-approved training location and the rotation must be under the supervision of an ACGME-accredited residency program. Because School of Medicine resident salaries and benefits (including malpractice insurance) are paid by the hospital at which the resident rotates, salary and benefits are not paid for rotations outside of School of Medicine affiliated hospitals/institutions. Therefore, a resident seeking to do a rotation at an external training location is responsible for ensuring that their salary and benefits, including malpractice insurance, is paid for by the receiving training location or another external source. Residents may choose to forgo salary/benefits during this time, or use vacation time to support an external rotation; however, the resident is still responsible for confirming, and verifying to the Program Director and GME Office upon request, that the resident will have professional liability insurance for the entire rotation at the external site.
3. The School of Medicine will not authorize the transfer of any of its resident FTE caps to support a resident's external rotation.

I. Auxiliary Learners

1. Auxiliary learners are learners that are not residents in the residency program, but include residents from other specialties and/or residency programs, subspecialty fellows, PhD students, pharmacology students, nurse practitioners and other health care learners. Auxiliary learners must enhance and not interfere with the education of residents appointed in the residency program.
2. Program must report circumstances when the presence of other learners interferes with the residents' education to the DIO and to the GMEC.
3. The Program Director must approve the presence of all auxiliary learners. If, in the Program Director's discretion, the presence of auxiliary learners dilutes or compromises the training of residents in their residency program, the Program Director may end the participation of auxiliary learners within the training environment.

J. External Resident Rotations at a School of Medicine Participating Site

1. External rotators are residents who are currently enrolled in an ACGME-accredited residency program at a sponsoring institution other than the School of Medicine.
2. The Program Director of the School of Medicine residency program in which the external rotator seeks to rotate and the GME Office must approve the external rotation to ensure that the presence of the external rotator enhances and does not disrupt the educational experience of the residency program's appointed residents.
3. The external rotator's sponsoring institution must financially support the rotator, including salary, benefits, and professional liability insurance, while the resident is rotating in a School of Medicine sponsored residency program.

- a. If the external rotator's sponsoring institution is seeking Medicare GME payments for the external rotator, the graduate medical education office for the external rotator must arrange a resident FTE cap transfer with the hospital at which the resident will rotate. The rotation terms and the corresponding payments will be exchanged between the external rotator's sponsoring institution and the hospital. The role of the GME Office is approve the rotation, not to facilitate the contract between the external rotator's sponsoring institution and the hospital.
 - b. If the external rotator's sponsoring institution is not seeking Medicare GME payments for the external resident, the external resident's sponsoring institution must assume all financial responsibility for the resident, including salary, benefits, and malpractice insurance.
4. The procedure for an external rotator to apply for a rotation within the School of Medicine is as follows:
- a. The receiving Program Director must approve the rotation;
 - b. The DIO and GME Office must be informed of how the external rotator will be funded and must approve the rotation;
 - c. The receiving Program Coordinator will be responsible for the appropriate credentialing of the resident for their respective rotation(s), which will include:
 - i. Verification of approval from the external rotator's sponsoring institution;
 - ii. Verification of malpractice insurance;
 - iii. Assuring the appropriate orientation for the hospital/clinic rotations at which the external rotator will rotate;
 - iv. Completing appropriate forms (TB testing, etc.) as required by the hospital at which the external rotator will rotate;
 - v. Obtaining a hospital ID card;
 - vi. Arranging for parking/beeper and other required amenities;
 - vii. Ensuring the external rotator has been trained in all applicable School of Medicine and affiliated hospital policies, including but not limited to, HIPAA training and compliance and Electronic Medical Record (EMR) training;
 - viii. Ensuring appropriate evaluation forms are returned to the rotator's sponsoring institution; and
 - ix. Communicating with the hospital at which the external rotator will rotate that the resident is currently rotating with the residency program and ensuring that the hospital has all necessary forms/credentials.
5. Once the external rotator has complied with these procedures, for the purposes of hospital credentialing, the external rotator will be considered a part of the residency program for the time that the external rotator rotates at the School of Medicine affiliated hospital. All School of Medicine policies and procedures that apply to School of Medicine residents apply to

- external rotators during the rotator's time with the School of Medicine, including, but not limited to, grievance and supervision policies.
6. As stated above, the GME Office is not responsible for the credentialing of an external rotator. The receiving Program Coordinator and Program Director have this responsibility.
 7. Programs must report circumstances when the presence of an external rotator interferes with the residents' education to the DIO and to the GMEC.

K. Residents not in ACGME-accredited programs

1. Post residency or fellowship trainee are trainees who have previously completed their residency in an ACGME-accredited program who are now seeking to engage in additional clinical training for which there is no ACGME-accredited program (e.g., fellows seeking additional clinical training outside of ACGME-accredited training programs).
2. The procedure and policies for a non-accredited trainee to participate in a residency program is as follows:
 - a. The trainee must receive prior approval from the Program Director. The Program Director is responsible for ensuring that the non-accredited trainee's presence enhances and does not disrupt the educational experience of the residents in the residency program;
 - b. The DIO must approve the non-accredited trainee's participation in the residency program;
 - c. The non-accredited trainee must be credentialed by the credentialing committee for the hospital at which the non-accredited trainee will rotate. Credentialing of non-accredited trainees is the responsibility of the hospital credentialing committee and not the responsibility of the GME Office. The GME Office will provide no verification of training for non-accredited trainees;
 - d. The departmental Chair is responsible for ensuring that the non-accredited trainee complies with all applicable School of Medicine and affiliated hospital policies, including but not limited to, HIPAA training and compliance;
 - e. Non-accredited trainees are the responsibility of the sponsoring department and residency program and not of the GME Office or any other residency program. Non-accredited trainees will not be provided financial compensation or benefits, including malpractice and health insurance, by the School of Medicine; and
 - f. The rights afforded to residents in residency programs are not extended to non-accredited trainees, including but not limited to, due process and grievance. Applicable rights are the responsibility of the sponsoring department. Non-accredited trainees may be removed from a rotation at any time, at the discretion of the Program Director or the DIO, if their presence is found to diminish the educational experience of residents in an accredited program.
 - g. Programs must report circumstances when the presence of a non-accredited trainee interferes with the residents' education to the DIO and to the GMEC.

L. Observers

1. Observers are trainees who have not completed nor are they enrolled in an ACGME-accredited residency program.
2. Observers may participate in a residency program as follows:
 - a. The observer must receive prior approval from the Program Director. The Program Director is responsible for ensuring that the observer's presence does not disrupt the educational experience of the residents in the residency program;
 - b. A School of Medicine faculty member must agree to sponsor the observer. The sponsoring faculty member is responsible for ensuring that the observer is in compliance with School of Medicine, hospital and Tulane University policies and procedures;
 - c. The DIO must approve the observer's participation in the residency program;
 - d. Observers may not participate in clinical decision making or provision of patient care. The observer's role is simply to observe the provision of patient care, similar to the participation of medical school students on rotations;
 - e. Observers are not employees of the School of Medicine, instead:
 - i. The School of Medicine will not provide financial compensation or benefits, including professional liability insurance, to observers;
 - ii. The rights afforded to Tulane employees and residents, including but not limited to, due process and grievance, are not extended to observers; and
 - iii. Participating as an observer is a privilege and may be revoked without cause for any reason, including but not limited to, failure to comply with the standards noted in this section; and
 - f. Observers will not be offered credit towards residency requirements.
3. Residency programs may not charge observers for their participation.

M. Institutional Oversight

1. In fulfilling institutional oversight responsibilities, the GMEC, directly and through applicable GMEC subcommittees, will monitor residency program compliance with this Policy.

IV. References/Associated Policies

- Tulane University School of Medicine, Graduate Medical Education *Appendix C: Sample Contract*
- Tulane University School of Medicine, Graduate Medical Education *III. Policy on Closure, Reduction or Expansion*
- Tulane University School of Medicine, Graduate Medical Education *XV. Policy on Remediation, Suspension, Dismissal and Grievance*
- Tulane University School of Medicine, Graduate Medical Education *XXV. Policy on Non-Competition*