

FAMILY MEDICINE

SCOPE OF PRACTICE PGY-1 – PGY-3

PGY-1

- The Intern will be responsible for all daily care of the patient.
- He/She will see all patients within a timely manner, once admitted to the floor, and will write comprehensive histories and physical exams on each admitted patient.
- The Intern will write all orders and will follow up on all patient studies and consults. Interns will review all laboratory results and medication regimens daily, making necessary adjustments.
- The Intern will discuss all admissions with the Resident.
- Interns will present their patients to the Attending Physician and will assist students in preparing presentations.
- Interns will update lists of all patients under their care each afternoon to checkout to colleagues. The late-stay and overnight Interns will write notes on all patients seen on cross-cover and will expect the same from colleagues.
- Interns (or students under their direction) will write daily progress notes and discharge notes.
- Interns will perform all procedures on the wards and Residents are expected to assist and supervise as needed. All procedures are to be documented in the patient's chart and in MedHub. Informed Consent must be obtained prior to all non-emergent procedures.
- Interns will report all problems directly to the Resident, Attending, or Program Director as appropriate.
- Interns are responsible for appropriate off-service notes or prepped D/C summaries on all their patients prior to switching services.

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- Check-out time is 5 PM. The primary house staff team is responsible until 5 PM.
- On ambulatory rotations and in the continuity clinic, PGY1 residents present all patients directly to the attending physician. The intern is expected to begin developing the care plan. The attending physician will directly see all patients in the first 6 months.

PGY-2 & PGY-3

- Initial care plans for all patients admitted to the teaching services will be made by the Resident and Intern.
- Patients admitted to the team will be seen and examined by the Resident, and a Resident Admit Note will be completed for each patient admitted to the inpatient service.
- The Resident will review daily care plans for the patients with the Intern and will lead daily work rounds with the Interns and students.
- The Resident will assign patients to students and Interns.
- The Resident will directly supervise the work of interns and students, including all procedures.
- The Resident will discuss all patient care plans with the Attending Physician on a daily basis during rounds. Overnight residents are expected to call the attending at 9pm and 6am, and more often as needed. PGY2 residents must call to check out each admission until specifically permitted to batch admissions by the on-call attending.
- The Resident will identify any educational needs of the team and convey these to the Attending Physician.
- The Resident will immediately notify the Attending Physician of all problems, need for invasive procedures, questions on patient care, changes in the level of patient care (i.e.

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transfer to the ICU), deaths, and risk-management issues. The Resident will make certain that the Attending Physician or another approved supervisor is present for any procedures for which the Resident has not been deemed competent to perform without direct supervision. All procedures should be recorded in Medhub.

- Residents should assist Interns to allow rapid completion of discharge summaries (write progress notes, orders, call consults, etc.).
- Residents assume patient care duties on weekend days when both Interns have the day off.
- Admissions arriving after 6:30 AM will be seen by the day team. The patient must be examined and assessed. If not acute, holding orders may be written. The H&P and Resident Admit Note (RAN) can wait to be written by the day team.
- On ambulatory rotations and in the continuity clinic, PGY 2 and 3 residents present all patients directly to the attending physician. The resident is expected to develop the care plan. The attending physician will directly see patients as needed.