VCU Internal Medicine Training Program
Conference Attendance Policy

General

This policy addresses housestaff responsibility for attending important educational conferences throughout the 3 years of residency. The RRC-IM requires all Internal Medicine training programs provide a minimum of 150 hours per year of core conferences in addition to morning report and rounds. Core conferences are defined by the RRC-IM as grand rounds, CPC conferences, morbidity and mortality review conferences, literature review activities, and other core curriculum didactic sessions. The RRC-IM has outlined specific topics to be covered in this series; please refer to the IM requirements for further details. Residents should attend at least 60% of these conferences.

VCU Internal Medicine training program offers approximately 200 “core” conferences per year at each training site (VCU Medical Center and the McGuire VA Medical Center). These include the following: grand rounds, core curriculum series, GME conference, M&M, EM-IM, journal club/EBM, and skills sessions. In addition, morning report is held three times per week at each institution and intern report is held once per week at each institution; schedules are posted on the New Innovations system and are outlined below.

Overall Organization of Conference Schedule

- Morning conferences for the VCU Internal Medicine Residency Program are held from 8:00 - 9:00am Monday-Friday at both VCUMC and the VAMC. Attendance is required for all R2/R3 residents except when on night shift cycles in rotations (ER, MAR, heme/onc nights, NF), on vacation or on off-site rotations. Department of Medicine faculty participate in all morning sessions.
- Morning conferences include Chief Resident's case-based conference, morning report, Skills Sessions, journal club/EBM, and Physical Diagnosis rounds. Grand Rounds, including CPC conferences are held on Thursdays at 7:30am at the VCUMC and at 8:00am on Fridays at the VAMC. Note that there are no Physical Diagnosis rounds at the VA.
- Core Internal Medicine conferences are held on Tuesdays from 3:00-5:00pm at VCUMC and telecast to the VAMC. Core conferences run on an 18 month cycle and thus are repeated twice during a 3-year period. Tuesday conferences from 5:00-6:00pm rotate and include Morbidity & Mortality conference, housestaff meetings and Jeopardy. In addition, Emergency-Medicine/Internal Medicine combined conference and the Graduate Medical Education Series (telecasted to the VA Hospital) are held once per block on select Wednesdays at noon.
- Intern Conference is held on Wednesdays at noon at the VA and Thursdays at noon at VCUMC. Attendance is required of all R1 residents.

Conference Attendance Requirements

- “Core” conference attendance – Housestaff are required to attend 60% of conferences required for the resident’s level of training. Because VCU Internal Medicine residents rotate at two institutions, this requirement will be converted to a numerical minimum for easier tracking and accountability. See minimum numbers for 2011-12 below.
  - R1 – includes all core conferences Tuesday through Friday, including AM grand rounds at current rotation site. Minimum number of conferences over 2011-12 year is 80.
  - R2/R3/R4 – includes all core conferences Tuesday through Friday PLUS journal club/skills. Minimum number of conferences over 2011-12 year is 100.
- Morning report – attendance at morning report is required of all R2/R3/R4 residents; interns are encouraged to attend. Residents are excused from morning report only when on night shift.
cycles, off-site rotations, and on vacation. MCVH and the VA average 150 morning reports per
year at each site. **Residents are expected to attend at least 75 sessions during the year.**

- Intern report – attendance at intern report is limited to interns only. Interns are required to
  attend ALL intern reports, unless on night shift cycles, post-call, off-site rotations or on vacation.
  MCVH and VA average 40 intern conferences per year. **Interns are expected to attend at least 20 sessions during the year.**

**Program Responsibility in Making Housestaff Aware of Conferences**

- The conference curriculum is created and maintained by the Office of Educational Affairs. The
  conference schedule is kept up to date on New Innovations and includes location, speaker and
  associated references, presentations and handouts.

**Tracking Conference Attendance**

- Core conference attendance will be in tracked “real time” through the electronic tracking system
  in New Innovations. CMRs will be responsible for collecting attendance at conferences each day;
  this will be entered directly into the electronic system at the time of conference. Residents who
  are more than 10 minutes late to conference are encouraged to attend and participate but will
  not be given credit for attendance. Residents may view their attendance at any time in the New
  Innovations system.

**Exceptions to Conference Attendance**

- Extenuating circumstances, to be determined individually, may limit a resident’s ability to meet
  the conference requirement.
- During particular times/services, residents may be unable to attend conference. This
  includes:
  - Days off on call-based inpatient services.
  - Post-call on call-based inpatient services.
  - Emergency Medicine shifts that begin at 12:00pm or later.
  - Any service or shift on which attending conference directly contributes to a work hour
    violation.
  - Away electives.
  - Vacation.
  - Attending another subspecialty-based morning conference while on that elective.

- These exceptions were considered in establishing the required yearly minimum for required
  conference attendance.

**Remedial action for not meeting conference requirements.**

- A resident may track their core conference attendance electronically at any time. This data will be
  reviewed at mid-year and end-of-year reviews with the program directors. If the minimum yearly
  requirement is not met, a memo will be place in the resident file reflecting the professionalism
  considerations as well as the loss of educational opportunities for that resident. This will be
  considered in the overall competency score of professionalism that is part of the permanent ABIM
  record. In addition, the Department Clinical Competency Committee will review all residents not
  meeting attendance requirements and will make further recommendations based on the
  individual resident’s performance in the program.

**REVISED DATE: 8/15/11**

**ISSUED BY:** Stephanie Call, MD, MSPH