Call to Order

1. Review of January 10, 2019 Minutes ......................................................... E. Benjamin Clyburn, MD

2. New Business .................................................................................................... Dr. Clyburn
   A. Protected Health Information........ Wally Pregnall and Angela Wertz
   B. Request for Permanent Increase in Program Complement (Urology)
   C. Request for Temporary Increase in Program Complement (Dermatology)
   D. Request for New Program Director (Hematopathology)
   E. Request for New Program Director (OB/GYN)
   F. ACGME Resident Agreement 19-20

3. ACGME Correspondence ................................................................................... Dr. Clyburn
   A. Continued Accreditation (CardioThoracic Surgery, Neurosurgery, Dermatology, Micrographic surgery and dermatologic oncology, Institution, Radiation Oncology, and Plastic Surgery, IM subspecialties)
   B. Continued Accreditation with Outcomes (Plastic Surgery – Integrated)
   C. Approval of Complement Increase (Emergency Medicine, Neurology, Dev/Beh Peds)
   D. Denial of Complement Increase (Neurosurgery)

4. Resident Representatives' Report ................................................................. Drs. Ghanim, Hardy, Horton and Sealy

5. VA Update ....................................................................................................... Terrill Huggins, MD

6. Quality Update ................................................................................................. Elizabeth Mack, MD

7. PC Update ......................................................................................................... Melanie Pigott, C-TAGME

8. Program Information ......................................................................................... Dr. Clyburn
   A. Annual Program Evaluations (APE) ................. Leonie Gordon, MD
      i. Internal Medicine
      ii. Maternal Fetal Medicine
      iii. Peds Gastro
      iv. OB/GYN
   B. Remediations: 2 residents in 2 programs
   C. Duty Hours

9. Old Business

ANNOUNCEMENTS

Please encourage any of your residents that may be interested in House Staff Council to attend the next meeting on Tuesday, March 12 at 6:00 p.m. in 419 CSB. Any resident/fellow is welcome to attend.

The Chief Resident/Resident Representative meeting is January 20 at Noon in 125 Gazes.

Next GMEC Meeting – Thursday, March 14 at 4:00 p.m. in 628 CSB.

MUSC GME 19-20 Chief Resident Leadership Conference
Friday, May 24, 2019 – All Day
Charleston Area Convention Center
MEMBERS PRESENT: Batalis, Nick MD [Pathology]; Britten, Carolyn MD [Hem/Onc]; Bush, Jeff MD [Emergency Medicine]; Campbell, Ruth MD [Nephrology]; Clyburn, Ben MD [Internal Medicine]; Cox, Lindsey MD [Urology]; Ghanim, Majd MD [House Staff Council President] via proxy; Gordon, Leonie MD [Assoc. Dean for GME]; Hardy, Tom MD [Pediatrics – Resident Rep]; Horton, Josh MD [Otolaryngology – Resident Rep]; Huggins, Terrill MD [VAMC]; Judge, Dan MD [Cardiology]; Kantor, Ed MD [Psychiatry]; Leddy, Lee MD [Orthopaedics]; Lewis, Madelene MD [Radiology]; Marchell, Richard MD [Dermatology]; Marshall, David MD [Radiation Oncology (At large member)]; Mennito, Sarah MD [Med-Peds]; Meyer, Ted MD, PhD [Otolaryngology] via proxy; Milano, Nick MD [Neurology]; Pigott, Melanie [Emergency Medicine (PC)]; Savage, Ashlyn MD [OB/GYN]; Southgate, Mike MD [Pediatrics]; Streck, Christian MD [Surgery]; Yamada, Ricardo MD [Interventional Radiology]; Zbylewski, Sina MD [Pediatric Cardiology]

MEMBERS ABSENT: Armstrong, Milton MD [Plastic Surgery (At large member)]; Barth, Kelly DO [Med-Psych]; Guldan, George (GJ) MD [Anesthesiology]; Keith, Brad MD [Internal Medicine (At large member)]; Mack, Elizabeth MD [Quality]; Nutilantis, Matt MD [Ophthalmology]; Pastis, Nick MD [Pulmonary/Critical Care]; Sealy, Clark MD [Anesthesiology – Resident Rep]; Spiotta, Alex MD [Neurosurgery]; Steed, Martin DDS [Oral Surgery (At large member)]; Tavana, Lance MD [Plastic Surgery – (At large Member)]; Willner, Ira MD [Gastroenterology];

GME OFFICE: Rob Chisholm, Ann Ronayne, Hung Vo, Angela Ybarra

GUESTS: Anna Lee Adams (Cardiology); Jessica Lewis, MD (Infectious Diseases); Cassy Salgado, MD (Infectious Diseases); Edward Kilb, MD (Pulmonary CC); Mindi Martin (Maternal Fetal Medicine)

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**AGENDA**

**DISCUSSIONS/CONCLUSIONS**

**RECOMMENDATIONS/ACTIONS/WHAT/WHEN**

**WHO**

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<td>The minutes from December 12 were reviewed.</td>
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A. The 2019 Employee Survey by Press Ganey is out – please remind your residents that they are a part of this survey and have been sent a link to the survey along with the password to their@musc.edu account.

B. Developmental Behavioral Pediatrics is asking to go from 1 to 2 positions on a temporary basis (from 2019 – 2022). The impact of this temporary position will allow the division to broaden its educational goals to train leaders in the field of DBP.

C. Med Psych is asking for an international one-month rotation to Guatemala.

The committee received the information and approved the temporary increase and rotation requests.

For the departmentally funded positions, funds flow comes into play – this should be discussed at a
**ACGME CORRESPONDENCE/ISSUES:**

- **A.** The ACGME wrote and the Review Committees issued Initial Accreditation for three new programs: Geriatrics, Adult Congenital Heart Disease and Critical Care Medicine (IM). They all have an approximate site visit date of 2020.

**RESIDENT REPRESENTATIVES’ REPORT**

- Dr. Hardy reported that the HSC had received a complaint of the IRB is slow to respond to residents — that many residents had experiences at other institutions that are faster. The group suggested they contact one of the three coordinators for the IRB to expedite requests.

- HSC has moved forward on it’s salary request — and are waiting to hear back from the hospital on the 19-20 salaries.

**VA UPDATE**

- Dr. Huggins reported that he will send PDs an email reminder for progress notes in discharge summaries. He also indicated the VA has recruited for a PGY3 Quality and Safety Chief for Surgery position. They are three years into the Q&S Chief for Internal Medicine. The VA is in process of renovating their call rooms. GME expansion takes place in the Spring — in the next four-six weeks, please get your information and requests in to Dr. Huggins.

**HOSPITAL QUALITY REPORT**

- Dr. Mack reported zero resident peer review cases in the last few months.

- The 2nd quarter RIP data is due January 31.

**PROGRAM COORDINATOR REPORT**

- Ms. Pigott reminder everyone about all the various surveys (survey season), milestone due date coming up, RIP deadline coming up, and that all the Clerkships/Residencies/Fellowships are working on the next season.

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The GMEC understands and agrees with the Pediatrics’ residents that space is an issue in the new hospital. GME is concerned that integral people aren’t at the table — the PDs need to be engaged. Non-generating revenue space is marginalized with value added engineering being used as the base model. Call rooms are the most essential space that is needed, but educational space needs to be recognized as well. Dr. Clyburn will follow up with the Provost regarding this letter.
### PROGRAM INFORMATION

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<th>A. Annual Program Evaluations</th>
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<td>iii. Radiation Oncology</td>
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<td>iv. Peds Rheumatology</td>
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<td>B Remediations</td>
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A. All programs reviewed this month are in good standing. Psychiatry needs to work on the resident survey — getting the completion rate to 100% and concentrating on the educational content areas. The low scores on feedback about practice habits and compromised education significantly reduces overall mean. Pathology just needs to work on getting all faculty to fill out the survey. They have instituted a resident wellness chair — will be interesting to see how that pans out. Infectious Diseases has had some attrition in both resident and faculty areas. It is noted that the Associate PD will be taking over the program in the near future. It would be nice to see the faculty work with the fellows on scholarly activity — program is 22% compliant versus 76% nationally. Peds Cardiology had excellent progress on the action plan from last year and good metrics for the upcoming year. Med Peds is a strong program — yet the resident survey shows small drops in almost all categories (which are addressed in the action plan).

B. There are 2 residents in 2 programs currently on remediation.

C. The duty hours report was attached to the GMEC agenda. It should be noted that Evalue is close to a fix that will tell us when they residents are close to going over 80 hours, rather than waiting to tell us when they’ve gone over the 320 rule. We are not able to audit just the first 28 days of the month — there is no functionality in EValue to do this. We have asked EValue to write into the program that alerts the PD when a resident has gone over 80 hours in one week.

### OLD BUSINESS

There was no old business.

### ANNOUNCEMENTS

- Please encourage any of your residents that may be interested in House Staff Council to attend the next meeting on Tuesday, February 12 at 6:00 p.m. in 419 CSB. Any resident/fellow is welcome to attend.

- The Chief Resident/Resident Representative meeting is January 16 at Noon in 125 Gazes.

- Next GMEC Meeting — Thursday, February 14 at 4:00 p.m. in 628 CSB.

- MUSC GME Chief Resident Leadership Conference
  - Friday, May 24, 2019 — All Day
  - Charleston Area Convention Center

The GMEC approved the APE reports.

Dr. Gordon

Dr. Clyburn

Approved at the TBD, 2019 GMEC meeting.
Request for Change in Resident/Fellow Program Complement

☐ TEMPORARY ☒ PERMANENT

Program Name: Medical University of South Carolina

Program Director: Dr. Lindsey Cox

Program Coordinator: Lisa Kynoski

Department Chair: Dr. Thomas E. Keane

Specialty Program Director (if applicable): N/A

# of positions requested: 3

FROM: 12 (# current complement) TO 15 (# requested complement):

Requested Effective Date: July 1, 2019

Effective End Date (if temporary): N/A

Program Director Signature/Date: 1/10/19

Specialty Program Director Signature/Date: N/A

Department Chair Signature/Date: 1/10/19

Requests to change a program’s resident/fellow complement need review and approval by:

1) Strategic Manpower Committee (only if hospital is to provide funding)
2) MUSC GMEC
3) ACGME/RRC

Requests to specific ACGME/RRC’s must not be made until after approval by the MUSC GMEC. Requests should be made in the WebADS system no longer than six months following GMEC approval. No resident or fellow should be hired or promised a position until there has been approval by each group noted above.

Please address all the questions/requirements on the next page in your request. Send completed requests to E. Benjamin Clyburn, MD (c/o GME Office, room 202 MUH, MSC 333) at least two weeks prior to the GMEC meeting date where you would like this item considered.

FOR GME OFFICE USE ONLY:

Date Received: 1/10/19

Approved by the GMEC: __________________________

Date approved in WEBADS: _________________________
January 8, 2019

Lindsey Cox, M.D.
Associate Professor, Program Director

RE: GME Strategic Manpower Request: Urology Residency Increase

Dear Dr. Cox,

The GME Strategic Manpower Committee met to review your recent request regarding the increase to the Urology Residency program. The following decision was made by the Committee:

- The Committee approved the request for the increase of three residents in the Urology Residency Program. Recruitment for the three residency positions should begin promptly. It is the understanding of the committee that no further support for a Program Director or Program Coordinator will be needed.

- The committee understands that this increase will be a total of three residents, and that one of those residents will be funded fully through the VA., therefore the hospital will support the funding for two of these positions.

Please let do not hesitate to contact us with any questions or concerns.

Sincerely,

Phillip D. Warr, M.D.
Interim Chief Medical Officer and Executive Medical Director

CC: Ben Clyburn, MD
    Leonie Gordon, MD
    Lindley Pennekamp

Beth Adams
Linda Goodlett
Mike Dicus

Matt Wain
Adam Greene
Dan Murphy

"An equal opportunity employer, promoting workplace diversity."
Request for Change in Resident/Fellow Program Complement
Rationale, Impact and Financing for Complement Change

Please answer the following questions.

The Urology residency program is requesting three first year residency positions. The additional positions will be funded by MUHA for two positions (see attached letter from Strategic Manpower) and the Veterans Affairs Medical Center for one position.

These three first year residency positions are required by the Accreditation Council for Graduate Medical Education (ACGME). The ACGME has updated the program requirements for Urology to move from a 1+4 year program to a full 60 months of Urology, with residents entering at the PGY-1 level. Previous requirements have included a preliminary General Surgery intern year prior to entering Urology residency. Residents entered at the PGY-2 year and completed 4 years of Urology training for a total of 5 years of training. The Urology residency program is currently structured with 3 residents per year, which means that with this increase, there will be 5 x 3, or 15 total residents for a 60-month program as of July 2019. Previously, there was 12 residents in the 48-month program. There will be no change in the number of residents at each level of training based on this increase.

The program size will not change and the current PGY-1 residents will continue to spend 6 months on General Surgery rotations. The rationale for changing to a 60-month structure includes educational improvements for the residents, as well as improvements in longitudinal patient care. Urology programs can better standardize and design the curriculum if it is formulated under the Urology department starting in PGY-1 year. This change will help ensure residents are prepared for the PGY-2 year. Residents will have more opportunity for longitudinal patient care and will prepared to care for more complex urology patients during the PGY-2 through PGY-5 years because of increased exposure to Urology during the PGY-1 year.

During the PGY-1 year, residents will still be required to spend 6 months on rotations that are housed under General Surgery. These requirements include at least three months in General Surgery, and at least three months of core surgical training in surgical subspecialties (e.g., surgical critical care, trauma, vascular surgery). The General Surgery program will be affected by these changes, particularly the creation of a VAMC Urology intern rotation. The General Surgery service has typically provided an intern that rotates on the MUSC Urology Main Hospital service, and there was previously no intern for VAMC Urology. The MUSC Urology Main Hospital rotation will not be expected to change, but with the increase in the Urology training for the Urology PGY-1 residents at the VAMC, there will be more time that the General Surgery service will need to cover on the MUSC Urology Main Hospital service, as well as other services that will have vacancies due to the loss of manpower from General Surgery. These changes have been discussed with the program director and educational team within General Surgery, and they are agreeable to these changes, as made feasible by maintaining their overall complement.

Each trainee will graduate with a similar number of procedures because the overall number of residents is not changing, but these procedures will be shifted earlier in training by having additional time on Urology rotations during the PGY-1 year.
This increase will not change the rotation schedule for the PGY-2 through PGY-4 year, so all requirements from the ACGME and American Board of Urology that are in place for the remaining years of training will be the same after the increase. We will continue to have three residents at each year of training. The intern rotation schedule will include 6 months of General Surgery rotations and 6 months of Urology rotations (4 months at the VAMC and 4 months at MUSC.) Please see attached block diagram.

There will be an additional resident position at the PGY-1 level at the Charleston Veterans Affairs Medical Center. The incoming PGY-1 residents will share the additional 12 months of Urology training at the VAMC in 4-month rotations. This additional rotation will provide early exposure to all aspects of Urologic care, including clinic responsibilities, inpatient service responsibilities, operating room exposure, and outpatient procedures. The volume of Urology visits at the VAMC can easily support this addition.

Because the overall size of the program is not changing and the main hospital service already accommodates a PGY-1 level resident, no additional MUSC resources will be needed. The VAMC rotation currently has three residents (PGY 5, PGY 3 and PGY 2). The space used for residents at the VAMC is housed within Surgical Services and the Urology Clinic. The clinic space has been expanding over the last two years, and the additional resident will share touchdown space with desks and computers with the residents who are working in the procedure clinics and the operating room.
## 2019 - 2020
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<td>Intern 3</td>
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<td>Intern 4</td>
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<tr>
<th></th>
<th>Intern 1</th>
<th>Intern 2</th>
<th>GS</th>
<th>GS</th>
<th>Intern 3</th>
<th>Intern 3</th>
<th>GS</th>
<th>GS</th>
<th>Intern 1</th>
<th>Intern 1</th>
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<th>GS</th>
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<tbody>
<tr>
<td>MUSC Uro Intern</td>
<td>Intern 2</td>
<td>Intern 2</td>
<td>GS</td>
<td>GS</td>
<td>Intern 3</td>
<td>Intern 3</td>
<td>GS</td>
<td>GS</td>
<td>Intern 1</td>
<td>Intern 1</td>
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</table>
Request for Change in Resident/Fellow Program Complement

TEMPORARY □ PERMANENT

Program Name: Dermatology and Dermatologic Surgery

Program Director: Richard Marchell, MD

Program Coordinator: Mark Lynch

Department Chair: Dirk Elston, MD

Specialty Program Director (if applicable):

# of positions requested: 1

FROM: 13 (# current complement) TO 14 (# requested complement):

Requested Effective Date: 7/1/2020

Effective End Date (if temporary): 6/30/2023

Program Director Signature/Date: 1/21/19

Specialty Program Director Signature/Date: (if applicable)

1/25/2019

Department Chair Signature/Date:

Requests to change a program's resident/fellow complement need review and approval by:

1) Strategic Manpower Committee (only if hospital is to provide funding)
2) MUSC GMEC
3) ACGME/RRC

Requests to specific ACGME/RRC's must not be made until after approval by the MUSC GMEC. Requests should be made in the WebADS system no longer than six months following GMEC approval. No resident or fellow should be hired or promised a position until there has been approval by each group noted above.

Please address all the questions/requirements on the next page in your request. Send completed requests to E. Benjamin Clyburn, MD (c/o GME Office, room 202 MUH, MSC 333) at least two weeks prior to the GMEC meeting date where you would like this item considered.

FOR GME OFFICE USE ONLY:

Date Received: 1/24/19

Approved by the GMEC:

Date approved in WEBADS:
Request for Change in Resident/Fellow Program Complement
Rationale, Impact and Financing for Complement Change

Please answer the following questions.

1. How will additional positions be financed?
   - Please provide documentation.
     a. If the department will be funding the position(s), please submit a letter from the Chair indicating willingness to fully fund the position(s).
     b. If MUHA support is being requested, please complete the appropriate documentation to be submitted to and reviewed by the GME Strategic Manpower Committee
        http://academicdepartments.musc.edu/gme/director_coordinator/internal/gme-strategic-manpower.html
   - Funding is being provided by the Saudi Arabian Government.

2. Reason(s) for request to change the number of trainees in program:
   Our current current compliment of residents is 15, this has allowed us to offer a much more diverse clinic experience for our residents with a greater exposure to varied sub specialties. The benefits of this have been observed and noted by both attending and residents.
   
   With an additional resident it will enable the department to stay at 14 residents to take advantage of the extra pediatric derm exposure through the addition of an additional Pediatric Dermatologist and the start of the pediatric fellowship in the coming years. The added diversity of an international resident will aid cultural awareness of our current and future residents.
   
   An additional resident will preserve the protected time the the current residents have to work on scholarly activity through the reduction in on call demands. It will also free up additional time for residents to exceed the time amount required in cosmetic clinic, by allowing first year residents the opportunity spend time in this clinic.

3. What will be the impact of the change on the educational program? Please include both the positive and negative effects on the educational program in comparison to the current program size. This increase will allow for a more balanced residency split between MUSC and VA facilities next year. It would have one less resident and rotation that are currently being used.

4. What are the anticipated effects of your proposed program changes on other training programs at MUSC? This should pose minimal impact on other training programs at MUSC

5. How will the change affect the number of cases seen by the trainee? It should have little if any impact on the number of cases seen per trainee as we currently have faculty and facilities that are not fully utilized by the residency program.

6. If your RRC or American Board have requirements for a certain number of rotations, clinical experience, number of producers, cases, etc., will there be adequate experiences to meet RRC and Board requirements? Yes there will be adequate experiences to meet requirements, most of our residents have fulfilled these requirements by the end of their 2nd year of the 3 year program.

7. Assuming approval, what will the program look like for each year of training?
   - What will be added, deleted or moved?
   - Include a Block diagram by PGY year, for a model resident/fellow.
7. Will there be additional or new training sites needed to accommodate the change in trainee complement? If so:
   • List the additional site(s).
   • You will be required to provide completed Affiliation Agreement(s) before the start of the training.
No new sites will be required

8. Is there adequate space and resources (offices, desks, computers, labs, etc...) to accommodate the change? Please provide a summary of necessary resources. It will not affect resident rooms as the rooms are already configured to allow for 15 residents.
### Lower Level

- **Surgery / Bx Room Residency**
  - VA / Bx Room: Continuity Clinic, VA Admin, VA / Bx Room, VA / Bx Room
  - VA Surgery - with upper level: VA Surgery, Continuity Clinic, VA / Bx Room

- **Dermpath Lower Level**
  - VA: MUSC Admin, Adult Consults, VA, VA
  - VA / Bx Room: Adult Consults, Continuity Clinic, Elston RAC-ML, Pleasure

- **VA Continuity 1**
  - MUSC Administrative: Continuity Clinic, VA Surgery, VA minor with upper, VA
    - VA: MUSC Sr Attending Clinic, VA Admin, MUSC Surgery North Charleston, VA

- **Pediatrics Lower Level**
  - VA: VA Admin, VA Pediatrics, Continuity Clinic, VA
    - MUSC Admin: VA Pediatrics, Continuity Clinic, VA

- **VA Night Clinic**
  - VA: VA Admin, VA Pediatrics, Continuity Clinic, VA

- **VA Continuity 2**
  - VA: VA Admin, VA-Pediatrics, VA Goose Creek, VA

### Upper Level

- **Mohs-2**
  - VA: Marshall attending, MOHS, MOHS, Mohs
  - VA: Burton/March of Aesthetic MOHS, MOHS, Mohs
  - VA: MUSC Surgery North Charleston, Mohs
  - VA: MUSC Surgery North Charleston, Mohs

- **VA Upper Level 1**
  - VA: VA Surgery, Continuity Clinic in 3rd Year, Admin or VA in 2nd Year, VA Goose Creek, VA
  - VA: Burton/March of Aesthetic MOHS, MOHS, Mohs
  - VA: VA Surgery, Continuity Clinic in 3rd Year, Admin or VA in 2nd Year, VA Goose Creek, VA

- **VA Upper Level 2**
  - VA: VA Surgery, Continuity Clinic in 3rd Year, Admin or VA in 2nd Year, VA Goose Creek, VA
  - VA: VA Surgery, Continuity Clinic in 3rd Year, Admin or VA in 2nd Year, VA Goose Creek, VA
  - VA: VA Surgery, Continuity Clinic in 3rd Year, Admin or VA in 2nd Year, VA Goose Creek, VA

- **Dermpath**
  - VA: VA Dermatopathology Clinic
    - VA: VA Dermatopathology Clinic
    - VA: VA Dermatopathology Clinic
    - VA: VA Dermatopathology Clinic
    - VA: VA Dermatopathology Clinic
    - VA: VA Dermatopathology Clinic

- **Consults**
  - Elston attending, Consults, VA
  - VA in 3rd Year, Admin or VA in 2nd Year, VA
  - VA in 3rd Year, Admin or VA in 2nd Year, VA
  - VA in 3rd Year, Admin or VA in 2nd Year, VA
  - VA in 3rd Year, Admin or VA in 2nd Year, VA
  - VA in 3rd Year, Admin or VA in 2nd Year, VA

- **Pediatrics**
  - VA Night Clinic
  - VA: VA Pediatrics, Continuity Clinic, VA
  - VA: VA Pediatrics, Continuity Clinic, VA

- **Pediatrics 2**
  - VA: VA Pediatrics, Continuity Clinic, VA
  - VA: VA Pediatrics, Continuity Clinic, VA
MEMORANDUM

Date: February 7, 2019

TO: MUSC GMEC

FROM: Steven L. Carroll, M.D., Ph.D., FASCP, FCAP

RE: Appointment of New Program Director to Hematopathology Fellowship Program
Name – Kathryn Grace Lindsey, M.D.
Dept. – Pathology and Laboratory Medicine

I would like to nominate, Kathryn Grace Lindsey, M.D., for the position of Program Director for the Hematopathology training program. Dr. Lindsey will have authority and accountability for the operation of all components of the fellowship program. I am recommending Dr. Lindsey for this position because our current program director is stepping down. Dr. Lindsey has been actively involved in the Hematopathology training program throughout her tenure at MUSC and is quite familiar with its operation.

Dr. Lindsey is currently an Assistant Professor in the Department of Pathology and Laboratory Medicine. She has been board certified in Hematopathology since September 2016, board certified in Anatomic and Clinical Pathology since October 2013 and holds a MUSC medical staff appointment. Her South Carolina Medical License Number is MD31938. Enclosed is Dr. Lindsey’s curriculum vitae.

I am recommending Dr. Lindsey for this appointment to begin on February 15, 2019. I acknowledge that Dr. Lindsey will need to maintain board certification for the duration of her appointment as Program Director.

I have reviewed the Program Requirements for the Hematopathology Fellowship training program which are posted on the ACGME website, and can assure the GMEC that Dr. Lindsey can comply with all requirements.

The Department of Pathology and Laboratory Medicine will ensure that the Program Director has sufficient financial and administrative support and protected time for her educational and administrative responsibilities to the program.

I have discussed all the above with Dr. Lindsey. After approval by the GMEC, I understand the current program director needs to notify the ACGME electronically using their WebADS system.

Sincerely,

Steven L. Carroll, M.D., Ph.D., FASCP, FCAP
Chair, Department of Pathology and Laboratory Medicine

Cc: Program Director Applicant
Enclosure: CV
**Kathryn Grace Lindsey, M.D.**  
Curriculum Vitae

**SCHOOL ADDRESS**

Department of Pathology and Laboratory Medicine  
College of Medicine

Work Email: lindseyk@musc.edu

**EDUCATION**

<table>
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<tr>
<th>Year</th>
<th>Institution</th>
<th>Degree</th>
<th>Major</th>
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<tbody>
<tr>
<td>2004</td>
<td>University of Georgia</td>
<td>B.S.</td>
<td>Biology</td>
</tr>
<tr>
<td>2009</td>
<td>University of Texas Southwestern Medical School</td>
<td>M.D.</td>
<td>Medicine</td>
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**POSTDOCTORAL EDUCATION**

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<th>Role</th>
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<tr>
<td>2014 - 2015</td>
<td>Baylor University Medical Center</td>
<td>Hematopathology Fellowship</td>
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<tr>
<td>2013 - 2014</td>
<td>Medical University of South Carolina, Charleston, SC</td>
<td>Cytopathology Fellowship</td>
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<tr>
<td>2009 - 2013</td>
<td>Medical University of South Carolina, Charleston, SC</td>
<td>Pathology Residency</td>
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**LICENSURE AND CERTIFICATION**

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<td>09/2013</td>
<td>Licensure - South Carolina Board of Medical Examiners</td>
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<td>09/2016</td>
<td>Certification - American Board of Pathology in Hematopathology</td>
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<tr>
<td>10/2013</td>
<td>Certification - American Board of Pathology in Anatomic and Clinical Pathology</td>
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<tr>
<td>08/2014</td>
<td>Certification - American Board of Pathology in Cytopathology</td>
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FACULTY APPOINTMENTS

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<th>Institution</th>
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<tr>
<td>2015 - Present</td>
<td>Medical University of South Carolina, Pathology and Laboratory Medicine</td>
<td>Assistant Professor</td>
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UNIVERSITY AND NATIONAL COMMITTEES

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<th>Institution</th>
<th>Role</th>
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<tr>
<td>2017 - Present</td>
<td>Medical University of South Carolina, Institutional Review Board</td>
<td>Committee member</td>
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<td>2018 - Present</td>
<td>American Society of Pediatric Hematology and Oncology, Membership Committee</td>
<td>Committee member</td>
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<tr>
<td>2018 - Present</td>
<td>American Society for Clinical Pathology, Case Reports Author Subcommittee</td>
<td>Committee member</td>
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HONORS AND AWARDS

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<th>Description</th>
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<tr>
<td>2016</td>
<td>Inclusion in the Cancer Cytopathology Young Investigator Challenge Publications for: “Young Investigator Challenge: A novel, simple method for cell block preparation, implementation and use over 2 years”</td>
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<td>2004</td>
<td>South Carolina State Finalist, Rhodes Scholarship Competition</td>
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<td>2004</td>
<td>Phi Beta Kappa National Honor Society</td>
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<td>2002 - 2004</td>
<td>Barry M. Goldwater Scholarship</td>
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<td>2002 - 2004</td>
<td>Alpha Epsilon Delta. Pre- Medical Honorary</td>
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<td>2002</td>
<td>The Honor Society of Phi Kappa Phi, The University of Georgia Chapter</td>
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<td>2002</td>
<td>Dr. George Young Scholarship, awarded by Alpha Epsilon Delta. Pre- Medical Honor Society</td>
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<td>2001 - 2004</td>
<td>Academic Scholarship Identification Program</td>
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<td>2001 - 2004</td>
<td>The University of Georgia, Dean William Tate Honor Society</td>
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<td>2001 - 2004</td>
<td>Golden Key International Honor Society, University of Georgia</td>
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<td>2000 - 2002</td>
<td>Presidential Scholar, The University of Georgia</td>
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TEACHING EXPERIENCE/CURRICULUM DEVELOPMENT

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2016-2019 Pathology Resident Course in Cytopathology
Dr. Lindsey is responsible for the curriculum on Urine, Renal, Adrenal, and Body Fluid Cytology lecture series presented for the residents. She presents as part of the Cytology/Histology Educational conferences. During the fellowship year of 2017 to 2018, Dr. Lindsey developed a resident conference series on On-Site Cytologic Evaluations. This was designed to help residents feel more prepared for their on-site experience during their cytology rotations.

2016-2019 Pathology Resident Course in Hematopathology
Dr. Lindsey is responsible for the curriculum on Acute Myeloid Leukemia and certain subjects in Thrombosis and Hemostasis lecture series presented for the residents. She is particularly proud of the increased educational opportunities provided by the standardization of peripheral smear review. As the cogent reporting of peripheral blood smear results are a major part of a competent hematopathologist, this addition to the hematopathology fellow education is essential. Dr. Lindsey is currently working with Julie Hirschhomm to make a Heme-Molecular rotation for interested senior residents.

2016-2019 2nd Year Seminar Tutorial Teaching
The second-year medical school curriculum includes small group “Seminar Tutorial” Sessions that are taught by the pathology faculty.

RESEARCH EXPERIENCE

- **Medical University of South Carolina, Quality Control and Quality Assurance Research:** Dr. Lindsey has a keen interest in studying and simplifying processes that affect the patient care provided by pathology and laboratory medicine. These interests have led to several research projects, including the development of the currently used technique for cytology cell blocks.

- **Medical University of South Carolina, Collaboration with Drs. Michelle Hudspeth and Shayla Bergman:** Current efforts involve the laboratory evaluation of Hereditary Spherocytosis and the effects of the analytic techniques of laboratory equipment on red blood cell indices.

- **Medical University of South Carolina, Collaboration with the Wrangle / Rubinstein Laboratory:** The most time-consuming collaborative effort for Dr. Lindsey has been with Drs. John Wrangle and Mark Rubinstein. Their research efforts focus on the interaction of the immune system with lung primary malignancies. The ongoing projects T-cell receptor sequencing and multi-spectral imaging analysis of formalin fixed paraffin-embedded tissues.

- **Medical University of South Carolina, Collaborations with Residents and Fellows:** Dr. Lindsey has never turned down the opportunity to pursue the research interest of a resident or fellow. The projects do not always follow her own research interests, but she has found angles and projects for every resident who requested her help.

- **University of Texas Southwestern Medical Center, Texas, Medical Scientist Training Fellow, Patrick Harran, PhD:** After completing her second year of medical school, Dr. Lindsey worked for almost a year in the chemistry lab of Dr. Patrick Harran,
Department of Biochemistry, Division of Chemistry. She presented a departmental research seminar entitled, 'There and Back Again - Cancer to Chemistry,' but as she began planning her coursework and research options, It became obvious to her that the length of time required to complete her doctorate in medicinal chemistry would too greatly interfere with her plans to finish medical school and do a residency in Pathology.

- **University of Texas Southwestern Medical Center, Texas, Medical Scientist Training Fellow, Louis Parada, PhD:** Dr. Lindsey completed her second research rotation after her first year in medical school. Still interested in translational pathology, she worked for Dr. Louis Parada developing techniques for cell culture of central nervous system tumors from a mouse model of glioblastoma.

- **University of Texas Southwestern Medical Center, Medical Scientist Training Fellow, Kevin Rosenblatt, MD, PhD:** Dr. Lindsey completed her first research rotation during the summer before her first year in medical school. Because of her interest in both organic chemistry and pathology, she was interested in pursuing a research project in the field of translational pathology. She worked for the summer under the direction of Dr. Kevin Rosenblatt conducting research on proteomics testing for diseases using matrix assisted laser desorption/ionization time of flight mass spectrometry.

- **National Cancer Institute, Maryland, Summer Research Intern, Dr. Maria J. Merino, Chief of Surgical Pathology:** During the summers of 2002 and 2003, Dr. Lindsey completed internships in the Department of Pathology at the National Institutes of Health, National Cancer Institute in Bethesda, MD, funded by an NIH Intramural Research Training Award. She did studies on clinical immunology and pathology in the laboratory of Dr. Maria Merino, Chief of Surgical Pathology, Center for Cancer Research, National Cancer Institute. She learned new laboratory techniques, specifically in molecular and genetic characterization of neoplasms. The results of the 2002 studies were presented at the National Institutes of Health Summer Research Program. August 8, 2002, Correlation of HER2 Gene Amplification by Chromogenic In Situ Hybridization (CISH) and Immunohistochemistry." Dr. Lindsey also presented the research findings at the 94th Annual Meeting of the American Association for Cancer Research (AACR) in Washington DC. July 11-142003.

- **University of Georgia, Georgia, Center for Undergraduate Research Opportunities Fellow, Kenneth Latimer, DVM, PhD:** During spring and summer semesters 2001, Dr. Lindsey did research electives with Dr. Kenneth Latimer, at the School of Veterinary Medicine, successfully developing an Immunohistochemical procedure to detect natural killer cells in formalin-fixed, paraffin embedded tissue sections from fish. This staining technique is now being applied to investigations of a specific facet of cell-mediated immunity in fish. Knowledge of the immune system of fish will enhance our understanding of the health status of fish that are exposed to Infectious diseases or environmental pollutants.

**INVITED PRESENTATIONS**

1. Jester, R., Martin, I., Chajewski, O., Yang, J., and Lindsey, K. Alterations of vaginal microbiota and Discordance of Pap Test and Cervical Biopsy Correlations. Accepted for

2. Emmanuel, A., Jester, R., Schandl, C., Lindsey, K., and Hirschhorn, J. Accepted for platform presentation at the 108th Annual meeting of the United States and Canadian Academy of Pathology, National Harbor, Maryland, 2019.


7. Smith, K. and Latimer, K. (2002, April). Immunohistochemical (IHC) Detection of Natural Killer cells in Fish. Oral Presentation presented at: Center for Undergraduate Research Opportunities, Symposium at the University of Georgia; Athens, GA.

POSTER PRESENTATIONS


14. Lindsey, K., Stump, M., Chajewski, O., Spruill, L. Correlation of Bronchial Lavage or Washing cytology with High Grade Histologic Features in Primary Adenocarcinomas of Lung. Poster presented at 64th Annual Scientific Meeting of the American Society of Cytopathology; New Orleans, LA, 2016.


16. Lindsey, K, Dimashkieh, H., Houser, P., Yang, J. Evaluation of Bile Ductal Brushing Cytology in Diagnosis of Extrahepatic Biliary Tract and Pancreatic Ductal Carcinoma. Poster presented at 62nd Annual Scientific Meeting of the American Society of


PEER-REVIEWED PUBLICATIONS


PRODUCTS AND PATENTS


COMMUNITY SERVICE

- Dr. Lindsey currently volunteers as an outreach coordinator for the Charleston City Ballet Non-Profit. In October of 2018, she organized the 40th Annual Ballet Performance of Robert Ivey Ballet's Peter and the Wolf. It was performed for more than 3,000 Charleston area school children.
• Dr. Lindsey helps with preservation projects of a French Huguenot cemetery located in her neighborhood. In 2010 she produced a short educational film on the cemetery and the adjoining LaRoche family plantation.

• From 2013-2016, she served as the Vice President for a community non-profit organization, Johns Island Life Skills Program, a Montessori-Based educational program for underprivileged children on the sea islands of the Charleston area.

• In Medical school, Dr. Lindsey got involved in health care policy and politics. She participated in the "White coat invasion", lobbying the Texas State Legislature in First Tuesdays at the Capitol. She became president of her Medical Schools chapter of the Texas Medical Association and American Medical Association.

BIOGRAPHICAL SUMMARY

• Dr. Lindsey was born in Olney, MD and has lived in San Antonio and Dallas TX, Augusta and Athens, GA but considers Charleston SC her hometown. She attended Porter Gaud School, leaving for early admission to the Honors Program at The University of Georgia, where she graduated magna cum laude with a major in Biology from the Franklin College of Arts and Sciences. She received her medical doctorate from The University of Texas Southwestern Medical Center and completed residency in Pathology and a Cytopathology Fellowship at the Medical University of South Carolina. She completed a Hematopathology Fellowship at the Baylor University Medical Center, Dallas TX. She is currently an Assistant Professor at the Medical University of South Carolina, practicing both Cytopathology and Hematopathology. Her research interests most recently have been in process and quality improvement measures, lung, and urine cytology.
MEMORANDUM
2/1/19

TO: MUSC GMEC

FROM: Donna D. Johnson, MD

RE: Appointment of New Program Director
   Dr. Christopher Goodier
   Dept. of Obstetrics & Gynecology

I would like to nominate, Christopher G. Goodier, MD, for the position of Program Director for the Ob/Gyn training program. Dr. Goodier will have authority and accountability for the operation of all components of the residency or fellowship program. My recommendation of Dr. Goodier for this position is because the current Program Director will have another appointment.

Dr. Goodier is currently an Assistant Professor in the Dept. of Ob/Gyn. He has been board certified for six years and holds a MUSC medical staff appointment. Dr. Goodier graduated from residency in 2011 and has the minimum requirement of five years in clinical experience. His South Carolina Medical License Number is 29771. Enclosed is Dr. Goodier’s curriculum vitae.

I am recommending Dr. Goodier for this appointment to begin on July 1, 2019. I acknowledge that Dr. Goodier will need to maintain board certification for the duration of his appointment as Program Director.

I have reviewed the Program Requirements for the Ob/Gyn training program which are posted on the ACGME website, and can assure the GMEC that Dr. Goodier can comply with all requirements.

The Department of Goodier will ensure that the Program Director has sufficient financial and administrative support and protected time for his/her educational and administrative responsibilities to the program. For this position, Dr. Goodier will be protected for at least 50% of his time and will receive 50% of salary for this position.

I have discussed all the above with Dr. Goodier. After approval by the GMEC, I understand the current program director needs to notify the ACGME electronically using their WebADS system.

Sincerely,

[Signature]

Dr. Donna Johnson
Chair, Department of Obstetrics & Gynecology

Cc: Program Director Applicant

Enclosure: CV
Christopher Gill Goodier  
1188 Moss Bluff  
Mount Pleasant, SC 29464  
goodier@musc.edu

EDUCATION

Assistant Professor, Department of Obstetrics and Gynecology  
Division of Maternal Fetal Medicine  
Medical University of South Carolina  
Charleston, South Carolina

Fellow, Department of Obstetrics and Gynecology  
Division of Maternal Fetal Medicine  
Medical University of South Carolina  
Charleston, South Carolina

Resident, Department of Obstetrics and Gynecology  
Medical University of South Carolina  
Charleston, South Carolina

Doctor of Medicine  
Medical University of South Carolina  
Charleston, South Carolina

Bachelor of Science: Biological Sciences  
Clemson University  
Clemson, South Carolina

HONORS/AWARDS

Residency
Administrative Chief Resident, Department of Obstetrics and Gynecology,  
Medical University of South Carolina (MUSC), 2010-2011

H. Oliver Williamson Award for Excellence in Obstetrics & Gynecology,  
Department of Obstetrics & Gynecology, MUSC, 2011

J. Richard Sosnowski Award for Outstanding Achievement in Obstetrics,  
Division of Maternal Fetal Medicine, Department of Obstetrics & Gynecology,  
MUSC, 2011

J. Marion Sims Award for Surgical Excellence, Division of Gynecologic  
Oncology, Department of Obstetrics & Gynecology, MUSC, 2011

Minimally Invasive Surgery Award for Outstanding Skill in Operative  
Laparoscopy, Division of Gynecology, Department of Obstetrics and  
Gynecology, MUSC, 2011
Physician of the Month, Medical University of South Carolina, April 2011
1st Place Resident Original Research, Society for Obstetric Anesthesia and Perinatology, 2010
John M. Thorp, Jr. MD Resident and Fellow Research Award, OB/GYN Alliance, 2009

Medical School

Outstanding Senior Medical Student, Michael P. Russell Award, Department of Obstetrics and Gynecology, 2006-2007
John Cross, MD Classmate Support Award, MUSC College of Medicine, 2007
Honors, Maternal Fetal Medicine Externship, 2006
Honors, Junior Obstetrics and Gynecology Core, 2006
Honors, Junior Pediatrics Core, 2006
Honors, Junior Surgery Core, 2006
Honors, Doctoring Curriculum, 2003
United States Achievement Academy: Collegiate All-American Scholars Program, 2004

Other Awards/Honors

Professional

J. Peter VanDorsten Award, 2017
VHA Exceeding Excellence Award, 2000
VHA Leadership Award for Excellence in Customer Service, 1999

Clemson University

National Outstanding President of the Year, Kappa Sigma Fraternity, 1993
Most Outstanding Graduating Senior, William C. Webster Award, 1994
Tigerama Director, Blue Key National Honor Fraternity, 1993
Georgianna B. Camp Service Award, 1994
Tiger Brotherhood Honor Fraternity
Who’s Who Among American Colleges and Universities, 1994
Omicron Delta Kappa Honor Society

CERTIFICATION AND LICENSURE

South Carolina License, active, #29771
DEA License #FG0532526
USMLE Board Certified #51488690
American Board of Obstetrics and Gynecology #9024742
RESEARCH EXPERIENCE


Maternal Epidural Steroids to Prevent Neonatal Exposure to Hyperthermia and Inflammation. Poster Presentation Society for Maternal Fetal Medicine, 2015.


Are there benefits to re-screening pregnant women for HIV in the third trimester? Poster Presentation, Society for Maternal Fetal Medicine, 2014.


PUBLICATIONS


PRESENTATIONS


Pregnancy and Diabetic Ketoacidosis. MUSC Emergency Department Grand Rounds, Fall 2014
Redefining the Labor Curve. Strategies to avoid the 1st Cesarean section. 46th Annual OB/GYN Spring Symposium. Charleston, SC, 2015


High Risk Ob in rheumatologic and other conditions: testing and management. MUSC Department of Rheumatology Grand Rounds, June 2016.

Obstetric Potpourri. MUSC Department of Anesthesia Grand Rounds, September 2016.


ZIKA and Pregnancy. 14th Annual North Carolina/South Carolina Perinatal Partnership Conference. Concord, NC. September 2017


LEADERSHIP/COMMUNITY SERVICE ACTIVITIES

Medical Student Admissions Committee Member, Medical University of South Carolina (2014–present)
House Staff Peer Review Committee, Medical University of South Carolina
Medical Student Alumni Council, MUSC College of Medicine
Peer Facilitator to Hearing Impaired Student Colleague, College of Medicine
Professionalism in the Curriculum Committee, Office of the Dean, College of Medicine
Award Selection Committee, Office of the Dean, College of Medicine
Sophomore Advisor, College of Medicine

VOLUNTEER EXPERIENCE

Parent’s Advisory Board, N.E. Miles Early Childhood Development Center, College of Charleston, Charleston, SC
Habitat for Humanity, Charlotte, NC
Southern Baptist Hospital, New Orleans, LA
Touro Infirmary Medical Center, New Orleans, LA

WORK EXPERIENCE
Clinical Instructor, Department of OB/GYN  
Medical University of South Carolina  
Charleston, SC, 2011- 2012

Manager, Performance Consulting Division, VHA, Inc,  
Dallas, TX, 1998-2003

- Managed and conducted consulting engagements providing healthcare organizations with recommendations to improve operations, financial performance and quality. Typical projects resulted in a 10% potential reduction in operating costs.

- Managed relationship with Solucient, LLC, a VHA partner, which operates the most comprehensive healthcare comparative benchmarking system in the industry. Coordinated client relations, implementation and database audits.

- Managed VHA, Inc. Productivity Management Software, including marketing, implementation, standards development, and maintenance.

Management Consultant, Operational Consulting Division, Premier, Inc.  
Charlotte, NC, 1995-1998

Consultant II, St. Joseph's/St. Anthony's Health System  
Tampa, FL 1996-1998

- Developed and maintained system-wide productivity report providing detailed decision support information to assist system leadership control costs while maintaining quality of care.

- Participated in steering committee charged to improve and modernize patient care delivery model.

- Audited patient classification system to identify and recommend appropriate staffing levels.

Consultant I, St. Vincent's Infirmary Medical Center  
Little Rock, AR, 1995-1996

- Served on executive task force to rebuild nursing-care model, projected savings reached $1.5 million annually.

Foreign Commercial Service Intern, The American Embassy

- Analyzed and compiled market research for several industrial sectors in the United Kingdom to assist American corporations with product development and marketing strategy.

- Identified and provided marketing opportunities for American business firms in Europe.

HOBBIES AND INTERESTS

Reading
Golf
Basketball
Baseball
This RESIDENT APPOINTMENT AGREEMENT ("AGREEMENT") is made as of <DATE PRINTED>, and entered into by and between the MEDICAL UNIVERSITY OF SOUTH CAROLINA GRADUATE MEDICAL EDUCATION PROGRAM ("MUSC GME PROGRAM") and the Medical University Hospital Authority (herein known collectively as MUSC GME PROGRAM) and <FIRST> <MIDDLE> <LAST>, <CREDENTIALS> for the period <DURATION OF CONTRACT>.

WITNESSETH

ARTICLE I

By virtue of this AGREEMENT, the above indicated individual is appointed as a Resident of the MUSC GME PROGRAM. The Resident agrees to abide by the policies, procedures, rules, and regulations of the Medical University of South Carolina, the Medical University Hospital Authority, and the MUSC GME PROGRAM, as these policies, procedures, rules and regulations currently exist and may, from time to time, be amended. The Resident has been informed that the MUSC GME Handbook for <ACADEMIC YEAR> is located at www.musc.edu/gmehandbook/. The Resident agrees to be responsible for knowing all information contained in the Handbook. The Resident acknowledges that he/she has reviewed the applicable Scope of Practice as outlined by the Residency Program. The Scope of Practice is located at www.musc.edu/gmehandbook/appendix/. The Resident acknowledges and understands that all PGY-1 Residents and those with a South Carolina limited license are not permitted to engage in any moonlighting, as defined in the MUSC GME Handbook.

The Resident understands that all Residents with a South Carolina PERMANENT LICENSE are permitted to ONLY engage in moonlighting, as defined in the MUSC GME Handbook, after receiving proper authorization through the MUSC Moonlighting Approval process (See Form).

The Resident acknowledges that information concerning professional liability insurance, health insurance, disability insurance, leave, eligibility for specialty board examinations, grievance procedures, and policies and procedures regarding duty hours and moonlighting are contained in the GME Handbook for <ACADEMIC YEAR> located at www.musc.edu/gmehandbook/ as well as the University Benefits Overview page located at http://academic.departments.musc.edu/hr/university/benefits/

ARTICLE II

The Resident's title is as follows:

<FIRST> <MIDDLE> <LAST>, <CREDENTIALS>
<DEPARTMENT> - <DIVISION>
<PGY>

Effective <DATE PAY IS EFFECTIVE>, the following pay levels were established:

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<thead>
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<th>LEVEL</th>
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<td>$57,840.00</td>
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</table>

ARTICLE III

RESIDENT OBLIGATIONS AND RESPONSIBILITIES:
1. The Resident must meet the qualifications for Resident eligibility as determined by the Accreditation Council for Graduate Medical Education (hereinafter ACGME) and the South Carolina Board of Medical Examiners. The Resident must submit to a criminal background check and a drug screen test in accordance with MUSC and the Medical University Hospital Authority requirements. Results of the criminal background check or a positive result in the drug screen test may result in rescinding the offer of a residency training position and this appointment. For Residents entering at the PGY-3 level or above, official documentation of passing the USMLE Step 3 (or COMLEX or MCCQE parts I and II equivalent) must be provided. Commencement of the Resident’s training is contingent on securing and maintaining an appropriate license in the State of South Carolina and, if applicable, controlled substance registrations as required by State and Federal agencies. Commencement of the Resident’s training is further contingent upon proof of U.S. citizenship or legal immigrant status, and proper work authorization or J-1 or H-1B approval as determined by the Program Director. The Resident agrees to provide proper documentation of these registrations to the MUSC Office of Graduate Medical Education at the time of issue and renewal. Failure to maintain proper credentials may result in suspension or termination from the MUSC GME PROGRAM and possible penalties and/or fines.

2. The Resident agrees to perform the duties and responsibilities required of him/her within the regular hours of work and the on-call hours as determined by the Program Director in conformity with the conditions established by the ACGME.

The Resident further agrees to comply with the ACGME duty hour limitations and policies or procedures implemented by the MUSC Graduate Medical Education Committee ("MUSC GMEC") to comply with these limitations. In that regard, the Resident agrees to accurately track and report duty hours as defined by the ACGME and the MUSC GMEC. The current MUSC GMEC policy on duty hours reporting states all Residents are required to report their duty hours using the E*Value system. Residents must log their duty hours a minimum of once every fifteen days. If fifteen days pass without a Resident logging his/her duty hours, the GME Office will notify the Program Director and the Coordinator of the Infraction. The GME Office will check the next day to ensure the past due hours have been made current. If not, the Resident will be sent home using a vacation day so that s/he may immediately log the delinquent duty hours. Repeated failure to report duty hours or falsification of duty hours will result in suspension and/or termination from the MUSC GME PROGRAM. The Resident shall notify the Residency Program Director and the ACGME Designated Institutional Official (ACGME DIO) for GME if s/he is in danger of exceeding the ACGME duty hours limitations.

3. The Resident agrees to perform his/her duties and responsibilities to the best of his/her abilities at a satisfactory level of competence as determined by the Program Director in consultation with the Residency Program’s faculty through a continuous, confidential evaluation of the Resident’s performance.

4. The Resident agrees to comply with all applicable policies, procedures, rules and regulations of the Medical University Hospital Authority and all other training facilities, as the same may exist from time to time, including any rules and regulations described in the MUSC GME Handbook.

5. The Resident agrees to complete medical records in accordance with the Medical University Hospital Authority policies (see MUSC GME Handbook) unless there is a valid excuse as determined by the Program Director. The Resident agrees to complete all medical records in a manner WHICH COMPLIES WITH ALL FEDERAL, STATE AND HOSPITAL POLICIES, RULES, AND REGULATIONS. The Resident's performance in medical record completion will be considered in the overall performance review when appointments are considered for renewal. Recurrent, ongoing, and continuing failure to meet this obligation may result in suspension or termination from the MUSC GME PROGRAM and possible penalties and/or fines.

6. The Resident agrees to meet the requirements of MUSC Employee Health Services relating to pre-placement clearance prior to starting the residency program, which includes a negative result from a drug screen test, and periodic evaluation of the Resident's ability to perform the duties and responsibilities required hereunder.

7. The Resident agrees to provide patient care commensurate with his/her level of knowledge and skill under a combination of direct supervision and progressive independence based upon demonstrated competence and abilities. The Resident agrees to provide safe, effective, and compassionate care based upon the best evidence available. The Resident will develop an understanding of ethical, socioeconomic/cultural and medical-legal issues that affect patient care and will learn to apply appropriate cost-containment measures in the provision of care.
8. The Resident agrees to participate in all educational activities of the residency program and those required by the MUSC GMEC. The Resident agrees to participate in any institutional committees or councils to which the Resident is appointed, assigned, or selected. The Resident accepts the responsibility for teaching and supervising medical students and other Residents and, when called upon, renders an evaluation of the performance of these individuals. The Resident's performance as a clinical teacher will be considered as part of the evaluation process and as a condition for renewal of this AGREEMENT.

9. The Resident agrees to take USMLE Part 3 (or COMLEX or MCCQE parts I and II equivalent) during the PGY-1 year and to pass the USMLE Part 3 (or COMLEX or MCCQE parts I and II equivalent) before the end of the PGY-2 year. Failure to take the exam during the PGY-1 year or to pass it before the end of the PGY-2 year will result in the non-renewal of this appointment.

10. The Resident agrees to abide by the MUSC Code of Conduct, to act in a professional manner, and present a professional appearance while engaged in any and all residency program activities. Recurrent, ongoing, and continuing failure to behave or dress professionally may result in suspension or termination from the MUSC GME PROGRAM.

ARTICLE IV

MUSC GME PROGRAM RESPONSIBILITIES:

MUSC GME PROGRAM agrees to provide, through its affiliated facilities, an education and training program that is accredited by the ACGME and its various residency review committees. The education and training will take place in facilities that are approved by the Joint Commission or other recognized healthcare accrediting agencies.

ARTICLE V

COMPENSATION AND BENEFITS:

MUSC GME PROGRAM agrees to provide compensation and benefits to the Resident as the sole consideration for the services provided by the Resident hereunder. For more specific details about each benefit, refer to the GME Handbook as well as the University Benefits Overview page located at http://academicdepartments.musc.edu/hr/university/benefits/

ARTICLE VI

TERMINATION:

Enrollment in the residency program during the period of this AGREEMENT is expressly conditioned upon satisfactory performance by the Resident during the entire term of the AGREEMENT.

In the event that the Program Director concludes that the Resident has not performed satisfactorily or has violated the terms of this AGREEMENT, the Resident may be dismissed by the ACGME DIO for GME. The Resident may request a grievance hearing in accordance with the procedure described in the MUSC GME Handbook.

If the Resident is terminated prior to this AGREEMENT's expiration date, the ACGME DIO will notify the South Carolina Board of Medical Examiners and when appropriate, the Educational Commission for Foreign Medical Graduates (ECFMG). In the event this AGREEMENT is terminated by the resignation of a Resident holding a Limited License, the ACGME DIO will notify the South Carolina Board of Medical Examiners, and when appropriate, the ECFMG.

The Resident further acknowledges by signing this AGREEMENT that evaluations of his/her work and progress in the residency program are an integral part of the residency experience. As such, information from these evaluations may be furnished to licensing boards, certification boards, credentials/privileging committees, prospective employers and/or other program directors. In instances where this information is shared, the Resident will indemnify and hold harmless the MUSC GME PROGRAM and its employees for any damages arising there from. Any information regarding a Resident's performance required by federal or state law will be released immediately to the proper authorities.
ARTICLE VII

MISCELLANEOUS:

1. This AGREEMENT constitutes the entire agreement of the parties. All prior agreements between the parties, whether written or oral, shall be of no force or effect. The paragraph headings used herein are for convenience only and shall not be used in the construction or interpretation of this AGREEMENT. Any reference to the masculine, feminine or neutral gender shall be deemed to include the other.

2. The Resident may not assign any of his/her rights, powers, duties or obligations hereunder without express prior written approval of the MUSC GME PROGRAM.

ARTICLE VIII

RENEWAL:

The Resident understands and agrees that the terms of the AGREEMENT are up to one (1) year or to completion of training, whichever comes first, as set forth in Paragraph 1, and no further appointment is assured or to be implied from any of the terms and conditions of this AGREEMENT or any other written or oral communications between parties. The MUSC GME PROGRAM may elect not to renew this AGREEMENT for any reason to include, but not limited to, unsatisfactory performance or any of a multitude of factors beyond its control (e.g., changes in Medicare funding or other regulations, changes in ACGME requirements, etc.). The Resident may request a grievance hearing regarding a decision of nonrenewal in accordance with the procedure described in the MUSC GME Handbook.

Successful completion of any Resident remediation plan, under the auspices of GME, is determined by the Resident’s CCC (Clinical Competency Committee). Renewal of a resident agreement will not be actualized until it has been determined that the Resident has successfully completed the remediation plan. If the Resident is in remediation or placed in remediation after a renewal agreement has been tendered and/or executed, GME reserves the right to rescind/cancel the renewal agreement.

The undersigned Resident acknowledges that evaluations are an important part of residency training and hereby grants the institution permission to provide such evaluations and related information to those it deems to have a legitimate right or need to know.

In Witness Whereof, the parties have executed this AGREEMENT:

Signature: ________________________ Date: ______________

Signature: ________________________ Date: ______________

Signature: ________________________ Date: ______________

Signature: ________________________ Date: ______________

Patrick J. Cawley, M.D., M.H.M, FACHE
VP for Health Affairs, University
CEO, MUSC Health

Raymond N. Dubois, M.D., Ph.D.
Dean, College of Medicine
Medical University of South Carolina

E. Benjamin Clyburn, M.D.
ACGME Designated Institutional Official for GME
Medical University of South Carolina

OFFICE OF THE
GENERAL COUNSEL

MUSC/MUHA

APPROVED AS TO FORM

By: ________________________ Date: ______________
Dear Dr. Denlinger,

The Review Committee for Thoracic Surgery, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Thoracic surgery - Integrated

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 4614521087

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 6
Residents per Level: 1 - 1 - 1 - 1 - 1 - 1
Effective Date: 01/11/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME’s Program Requirements and/or Institutional Requirements without any new citations.

RESOLVED CITATIONS

The Review Committee determined that the following citations have been resolved:

Institutional Support-Sponsoring Institution | Since: 01/06/2017 | Status: Resolved

The Sponsoring Institution must provide and document faculty development in education and teaching for the program director and the members of the faculty. (Detail) [Program Requirement: I.A.1.c)]

The information provided to the Review Committee did not demonstrate substantial compliance with the requirement. Specifically, review of the 2016 Faculty Survey demonstrated dissatisfaction with the provisions for faculty development to supervise and educate residents. [2016 Faculty Survey]
The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).

Sincerely,

[Signature]

Donna L. Lamb, DHSc, MBA, BSN
Executive Director, Surgical Accreditation
Review Committee for Thoracic Surgery
312.755.5499
dlamb@acgme.org

CC:
Ernest B. Clyburn, MD

Participating Site(s):
Medical University of South Carolina College of Medicine
MUSC Medical Center
Ralph H Johnson VA Medical Center (Charleston)
Trident Medical Center
1/16/2019

Alejandro M Spiotta, MD
Residency Program Director
Medical University of South Carolina
98 Jonathan Lucas Street
Suite 301 CSB, MSC 606
Charleston, SC 29425

Dear Dr. Spiotta,

The Review Committee for Neurological Surgery, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Neurological surgery

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 1604511079

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 14
Residents per Level: 2 - 2 - 2 - 2 - 2 - 2
Effective Date: 01/07/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

OTHER COMMENTS

On review of the 2018-2019 ADS Annual Update, the Committee commended the revised, resident-driven Faculty Mentor Program. Each faculty member is scheduled for a templated talk (designed by residents) that takes place during the monthly Academic Day. The talks cover topics ranging from their background, how they started their career in neurosurgery, research interests, ongoing scholarly activity, home life, and family-work life balance. Residents then reach out to faculty individually based on mutual interests, similar backgrounds and life experience. The program coordinator tracks and monitors meetings throughout the year. The program continues the Operation La Sierra resident wellness initiative that was started in 2015-16. Future updates on these and other educational initiatives would be welcome.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
1/17/2019

Richard M Marchell, MD
Associate Professor of Dermatology
Medical University of South Carolina
135 Rutledge Avenue, 11th Floor
MSC 578
Charleston, SC 29425-5780

Dear Dr. Marchell,

The Review Committee for Dermatology, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Dermatology

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 0804521099

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 12
Effective Date: 01/04/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME’s Program Requirements and/or Institutional Requirements without any new citations.

Subspecialty Programs
The following is a list of subspecialty programs associated with your program. Subspecialty programs with ** preceding the program number were not reviewed at the most recent RC meeting.

0814512001 - Micrographic surgery and dermatologic oncology
Continued Accreditation - Effective: 01/04/2019

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
1/17/2019

William J Cook, MD
Program Director
Department of Dermatology and Dermatologic Surgery
135 Rutledge Avenue, 11th Floor
MSC 578
Charleston, SC 29425-5780

Dear Dr. Cook,

The Review Committee for Dermatology, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Micrographic surgery and dermatologic oncology

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 0814512001

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 1
Effective Date: 01/04/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/4/2019

Ernest B Clyburn, MD
DIO
Medical University of South Carolina
169 Ashley Avenue, Room 202 Main Hospital
MSC 333
Charleston, SC 29425

Dear Dr. Clyburn,

The Institutional Review Committee (IRC), functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following institution:

Medical University of South Carolina College of Medicine
Charleston, SC

Institution: 8004500418

Based on the information available at its recent meeting, the Review Committee accredited the institution as follows:

Status: Continued Accreditation
Effective Date: 01/14/2019

The Review Committee commended the institution for its demonstrated substantial compliance with the ACGME's Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the institution. When corresponding with the ACGME, please identify the institution by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/4/2019

David T Marshall, MD, MS
Professor, Director, Radiation Oncology Residency Program
Medical University of South Carolina
169 Ashley Avenue
MSC 318
Charleston, SC 29425

Dear Dr. Marshall,

The Review Committee for Radiation Oncology, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

   Radiation oncology

   Medical University of South Carolina Program
   Medical University of South Carolina College of Medicine
   Charleston, SC

Program 4304521092

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

   Status: Continued Accreditation
   Maximum Number of Residents: 7
   Effective Date: 01/16/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
Milton B Armstrong, MD  
Program Director  
Medical University of South Carolina  
Division of Plastic Surgery  
96 Jonathan Lucas, POBox 250613  
Charleston, SC  29425

Dear Dr. Armstrong,

The Review Committee for Plastic Surgery, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Plastic surgery

Medical University of South Carolina Program  
Medical University of South Carolina College of Medicine  
Charleston, SC

Program 3604522093

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation  
Maximum Number of Residents: 6  
Residents per Level: 2 - 2 - 2  
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/6/2019

Christopher D Nielsen, MD
Director, Interventional Cardiology Fellowship Program
Medical University of South Carolina
25 Courteney Drive, 7ART, Rm 7063
MSC 592
Charleston, SC  294258911

Dear Dr. Nielsen,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Interventional cardiology

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 1524521087

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 3
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/6/2019

Cassandra D Salgado, MD, MS
Program Director, Professor of Medicine
MUSC/Infectious Diseases
135 Rutledge Avenue, 12th Floor Rutledge Tower
MSC752
Charleston, SC 29425

Dear Dr. Salgado,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Infectious disease

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 1464521104

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 5
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME’s Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/6/2019

Carolyn D Britten, MD
Division Chief, Professor, Program Director
Medical University of South Carolina
39 Sabin St
MSC 635
Charleston, SC 29425-6350

Dear Dr. Britten,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Hematology and medical oncology

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 1554521063

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 12
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/6/2019

Faye Hant, DO
Director, Rheumatology Fellowship Training Program
Medical University of South Carolina
96 Jonathan Lucas Street
Suite 808
Charleston, SC 29425

Dear Dr. Hant,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Rheumatology
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC
Program 1504521075

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 6
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME’s Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
Nicoleta D Sora, MD  
Program Director  
Medical University of South Carolina  
96 Jonathan Lucas Street, Sta 822  
MSC 624  
Charleston, SC 29425

Dear Dr. Sora,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Endocrinology, diabetes, and metabolism

Medical University of South Carolina Program  
Medical University of South Carolina College of Medicine  
Charleston, SC

Program 1434521088

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation  
Maximum Number of Residents: 5  
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/6/2019

Ruth Campbell, MD, MSPH
Program Director
Medical University of South Carolina
98 Jonathan Lucas Street
MSC 629, CSB 822
Charleston, SC 29425

Dear Dr. Campbell,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Nephrology

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 1484521156

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 10
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME’s Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/6/2019

Daniel P. Judge, MD
Program Director
Medical University of South Carolina
25 Courtenay Drive
MSC592
Charleston, SC 29425

Dear Dr. Judge,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Cardiovascular disease

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 1414521129

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 19
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/6/2019

Nicholas J Pastis, MD  
Program Director Pulmonary Critical Care Fellowship-MUSC  
Medical University of South Carolina  
96 Jonathan Lucas Street  
MSC 630- Room 816 CSB  
Charleston, SC  29425-6300

Dear Dr. Pastis,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

- Pulmonary disease and critical care medicine
- Medical University of South Carolina Program
- Medical University of South Carolina College of Medicine
- Charleston, SC
- Program 1564521067

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation  
Maximum Number of Residents: 15  
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/6/2019

J. Marcus Wharton, MD
Director, Clinical Cardiac Electrophysiology Training Program
MUSC, Medicine (CCEP)
114 Doughty Street; BM216
MSC 582
Charleston, SC 29425-5920

Dear Dr. Wharton,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Clinical cardiac electrophysiology

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 1544531099

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 4
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/6/2019

Leigh M Vaughan, MD  
Assistant Professor and Program Director of Hospice and Palliative Care  
135 Ashley Avenue  
MSC 581  
Room 1239 Rutledge Tower  
Charleston, SC 29425

Dear Dr. Vaughan,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Hospice and palliative medicine (multidisciplinary)

Medical University of South Carolina Program  
Medical University of South Carolina College of Medicine  
Charleston, SC

Program 5404512121

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation  
Maximum Number of Residents: 2  
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
2/6/2019

Ira R Willner, MD
Director, Gastroenterology Fellowship Program
Medical University of South Carolina
25 Courtney Drive
Suite 7100 A, MSC290
Charleston, SC 29425-2900

Dear Dr. Willner,

The Review Committee for Internal Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Gastroenterology

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 1444521107

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation
Maximum Number of Residents: 12
Effective Date: 01/25/2019

The Review Committee commended the program for its demonstrated substantial compliance with the ACGME’s Program Requirements and/or Institutional Requirements without any new citations.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System (ADS).
Dear Dr. Tavana,

The Review Committee for Plastic Surgery, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Plastic Surgery - Integrated
Medical University of South Carolina College of Medicine Program
Medical University of South Carolina College of Medicine
Charleston, SC
Program 3624500001

Based on the information available to it at its recent meeting, the Review Committee accredited the program as follows:

Status: Continued Accreditation without Outcomes
Maximum Number of Residents: 6
Residents per Level: 1 - 1 - 1 - 1 - 1 - 1
Effective Date: 01/25/2019
Approximate Self-Study Due Date: 01/01/2029

AREAS NOT IN COMPLIANCE (Citations)
The Review Committee cited the following areas as not in substantial compliance with the ACGME's Program Requirements and/or Institutional Requirements:

NEW CITATIONS

Educational Program - Procedural Experience | Since: 01/25/2019 | Status: New

[Program Requirement: II.D; II.D.1.] The institution and the program must jointly ensure the availability of adequate resources for resident education, as defined in the specialty program requirements. (Core) The sponsoring institutions and participating sites of the program must have an adequate number and variety of adult and pediatric surgical patients for resident education. Experience in all 12 categories of surgical experience is important and must not be limited by excessive clinical responsibility in any one or several categories or by excessive nonclinical activities. (Core)

The Information provided to the Review Committee did not demonstrate substantial compliance with the requirement. Specifically, review of the Institutional Data form provided with the program’s updated application demonstrated it to be incomplete listing only five of the seven participating sites identified by the program. Review of the data provided demonstrated...
there to be insufficient volume for facial aesthetic surgery and concern about the pediatric surgery volumes with removal of Palmetto Hospital as a site given that the cases identified at MUSC appear to be shared by multiple services. The program is advised to investigate the operative resources and to ensure they are sufficient. The program is further advised to monitor case logs frequently.

AREAS FOR IMPROVEMENT / CONCERNING TRENDS

The Review Committee identified the following areas for program improvement and/or concerning trends:

Curriculum Organization
Review of the block diagram demonstrated that numerous rotations are identified as being at multiple sites. Residents may follow faculty to other facilities during a rotation, but only one site should be identified as the primary site of rotation for a specific content area. The program is advised to amend the block diagram to make clearer where residents are during each rotation.

Failure to Provide Required Information
Review of the faculty roster demonstrated there to be faculty members listed only for participating sites one, two, and six. While the Committee does not require that all faculty be listed, there must be faculty identified for each participating site.

OTHER COMMENTS

The Committee commends the program and the faculty for their emphasis on physician well-being.

Programs are not required to respond to Areas for Improvement. Areas for Improvement are intended to advise the program of a concern noted by the Review Committee; however, that concern did not rise to the level of a citation. The program is advised to review all Areas for Improvement and address as necessary.

In the Common and specialty-specific Program Requirements, each requirement is categorized as "Detail," "Core," or "Outcome." Programs with a status of Continued Accreditation without Outcomes are subject to accreditation citation under requirements categorized as "Detail," "Core," or "Outcome," except for the requirements addressing (1) Case Logs (if they have not had a resident complete the program since accreditation was initially conferred), (2) graduate patient numerics (if they have not had a resident complete the program since accreditation was initially conferred) (if applicable to the specialty), and/or (3) board pass rates (if they have not had a resident who has taken a certifying examination in the specialty or subspecialty). Although programs with a status of Continued Accreditation without Outcomes are not subject to accreditation citation under requirements addressing (1) Case Logs, (2) graduate patient numerics (if applicable to the specialty), and (3) board pass rates, they are expected to comply with those requirements, as well as all other Core- and Outcome-categorized requirements, upon progression to the status of "Continued Accreditation."

The length of time a program may remain on Continued Accreditation without Outcomes is the accredited length of training plus one year, at which time the program must achieve a status of Continued Accreditation or Continued Accreditation with Warning or be subject to probationary accreditation or withdrawal of accreditation.

The ACGME must be notified of any major changes in the organization of the program. When corresponding with the ACGME, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to
1/8/2019

Jeffrey S Bush, MD
Assistant Professor of Emergency Medicine
Medical University of South Carolina
169 Ashley Avenue
MSC 300
Charleston, SC 29425

Dear Dr. Bush,

The Review Committee for Emergency Medicine, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Emergency medicine

Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC

Program 1104512183

Maximum Number of Residents: 30

OTHER COMMENTS

The Committee has approved your request for a permanent complement increase to 30 positions effective January 8, 2019.

This office must be notified of any major changes in the organization of the program. When corresponding with this office, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System.
1/30/2019

Nicholas J Milano, MD
Assistant Professor
Medical University of South Carolina
86 Jonathan Lucas St, Suite 301 Clinical Science Building
MSC 606
Charleston, SC 29425

Dear Dr. Milano,

The Review Committee for Neurology, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Neurology
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC
Program 1804521105

Maximum Number of Residents: 32

OTHER COMMENTS
The Review Committee has approved your request for an increase in resident complement from 28 to 32 positions effective July 1, 2019.

This office must be notified of any major changes in the organization of the program. When corresponding with this office, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System.
ACGME Temporary Complement Request Decision (Program [3364512020])

A Temporary complement change request has been approved for your program.

The Review Committee has included the following comments:

An administrative review was conducted and the request to implement an increase in fellow complement from 3-4 positions through 06/30/22 was approved. The program provided documentation that they have sufficient resources to support such an increase.
1/16/2019

Alejandro M Spotta, MD
Residency Program Director
Medical University of South Carolina
98 Jonathan Lucas Street
Suite 301 CSB, MSC 606
Charleston, SC 29425

Dear Dr. Spotta,

The Review Committee for Neurological Surgery, functioning in accordance with the policies and procedures of the Accreditation Council for Graduate Medical Education (ACGME), has reviewed the information submitted regarding the following program:

Neurological surgery
Medical University of South Carolina Program
Medical University of South Carolina College of Medicine
Charleston, SC
Program 1604511079

Complement Change Request: Denied

OTHER COMMENTS

On review of the permanent complement increase request, the Committee noted that the educational rationale is based on the need for more residents to cover the increased number of daily OR sessions. A compelling description for how the education of current residents would be improved was not provided. In addition, resources in DC7 and DC16 are concerning. The Committee, therefore, denied the request.

This office must be notified of any major changes in the organization of the program. When corresponding with this office, please identify the program by name and number as indicated above. Changes in participating sites and changes in leadership must be reported to the Review Committee using the ACGME Accreditation Data System.
The Ralph H. Johnson VA Medical Center
ICARE Distinguished Resident Award

Background:
The Ralph H. Johnson VA Medical Center will recognize residents/fellows, who not only provide excellent patient care, but who also exemplify VA’s ICARE values. The selected individuals will be recognized quarterly at the VA/MUSC Academic Partnership Council Meeting (APCM). Residents recognized for this award will be nominated either by their attending supervising physician, VA staff members, or more importantly, by a patient or a family member via communication through the attending physician, VA leadership, or VA Veteran Experience service line.

Criteria for Selection:
The resident/fellow selected for this prestigious award will have demonstrated one or more of the ICARE values listed below.

- **INTEGRITY** - Act with high moral principle. Adhere to the highest professional standards.
- Maintain the trust and confidence of all with whom I engage.
- **COMMITMENT** - Work diligently to serve Veterans and other beneficiaries. Be driven by an earnest belief in VA’s mission. Fulfill my individual responsibilities and organizational responsibilities.
- **ADVOCACY** - Be truly Veteran-centric by identifying, fully considering, and appropriately advancing the interests of Veterans and other beneficiaries.
- **RESPECT** - Treat all those I serve and with whom I work with dignity and respect.
- Show respect to earn it.
- **EXCELLENCE** - Strive for the highest quality and continuous improvement. Be thoughtful and decisive in leadership, accountable for my actions, willing to admit mistakes, and rigorous in correcting them.

Quarterly Selection Process:

1. The Designated Education Officer, Dr. J. Terrill Huggins, will notify Clinical Service Chiefs about the process to nominate trainees for this award.
2. Dr. Huggins will solicit quarterly nominations from Chiefs. All nominations must contain 1-2 paragraphs describing which ICARE value(s) were demonstrated and how.
3. Dr. Huggins will review nominations and forward eligible nominations to COS for final determination.
4. Those selected for nomination will be notified and presented an ICARE certificate at the quarterly VA/MUSC Academic Partnership Council meeting.
5. Dr. Huggins will notify the Division and/or Department Chair for the designated training program of the individuals who receive the ICARE award.
Program Name: Internal medicine

<table>
<thead>
<tr>
<th>Attraction</th>
<th>Scholarly Activity</th>
<th>Board Pass Rate</th>
<th>Resident Survey</th>
<th>Faculty Survey</th>
<th>Omission</th>
<th>Subspecialties</th>
<th>MISC Indicators</th>
<th>Action Plan</th>
<th>QI/Patient Safety</th>
<th>GME Stewardship</th>
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### Overall Attrition
- PD Change
- Faculty Attrition
- Resident Attrition
- Permanent Complement Changes

### Resident Survey
- 100% completed
  - Duty Hours
  - Faculty
  - Educational Content
  - Evaluation
  - Resources
  - Patient Safety/Teamwork

### Faculty Survey
- 100% completed
  - Supervision & Teaching
  - Educational Content
  - Resources
  - Patient Safety
  - Teamwork

### Data Omission
- Failure to complete WEBADS annual update (on time)
- Failure to turn in APE materials

### Resident Attrition
- Overall Negative Opinion

### Scholarly Activity
- Faculty
- Resident

### Involvement in QI/Pt Saf Projects
- Number of subspecialties with 3 or more indicators flagged: TBD

### Action Plan
- Board Pass Rate
- GME Stewardship

Page 1 of 2
Program Name: Internal medicine

Good Board take rate and pass rate
The PD (and/or Associate PDs) need to be on top of the number of residents involved in an RCA
Excellent rate of core faculty participating in faculty development

Don Rockey last recertified in 2001? Is it lapsed? There are others. Check listing of faculty and certifications - they must have recertified
Update Dr. Clyburn’s CV - more than 5 years has passed since some of the entries
Adequate scholarly activity for the program

Surveys
Faculty survey slightly below national mean in resources section
Very good survey results
Resident survey at or above the national mean in every category - steady increase over the last three years
Resident wellness survey shows some surprising stats - 20% were not eager to come back to work the next day; 13% didn't feel connected to work in a deep manner

Action Plan
Very good metrics that tie into surveys - the committee is interested in your progress with the cardiology service

Telehealth curriculum should be mentioned as a positive in your APE
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<tr>
<th>Program Name: Maternal Fetal Medicine</th>
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| Overall Attrition                     |
| PD Change                             |
| Faculty Attraction 14%                |
| Resident Attraction                   |
| Permanent Complement Changes          |

| Data Omission                         |
| Failure to complete WEBADS annual update (on time) |
| Failure to turn in APE materials       |

| Resident Survey 100% completed        |
| Duty Hours                             |
| Faculty                                |
| Educational Content                   |
| Evaluation                             |
| Resources                              |
| Patient Safety                         |
| Teamwork                               |

| Faculty Survey 100% completed         |
| Supervision & Teaching                |
| Educational Content                   |
| Resources                              |
| Patient Safety                         |
| Teamwork                               |

| Number of subspecialties with 3 or more indicators flagged N/A |

| Involvement in QI/Pt Saf Projects |
| GME Stewardship                   |

| Scholarly Activity                 |
| Faculty                              |
| Resident                             |

| Action Plan                          |
| Board Pass Rate                      |

Page 1 of 2
Program Name: Maternal Fetal Medicine

Excellent board scores
Very good faculty participation in faculty development at 100%
Fellow internal survey - they want more input on how the program is set up to achieve its objectives. Concern about quality of life and work life balance
Faculty internal survey - weakness noted in ultrasound curriculum. Well addressed in citations and action plan
Thorough response to citations and AFIs

Dr. Chang’s licensure expired in 2017 on his CV. There are also outdated entries in his bibliography
You should check the other CVs for current licensure information
The program need to ensure that the percentage of faculty completing written evaluations within two weeks is at least at 80%

Action Plan is measurable - will be interesting to see if the citations are rescinded after this year
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</table>
Program Name: Pediatric gastroenterology

The amount of time devoted to the program by the program coordinator must be known — at the very least, what is the funds flow allocation?
   Has the issue of a coordinator been solved? (Reason Misc. Indicators is red)
Your fellows get effective teaching methods training by computer module through their fellow orientation

Dr. Jump's CV needs updating (licensure, bibliography, etc...)
Dr. Palmadottir has no scholarly activity - do you need to keep her as core faculty?

Metrics for one action plan item not clearly defined with objective targets. "Will increase satisfaction with mentor..." will be measured how and to what level?
   Otherwise, good action plan
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<th>Program Name: OB/GYN</th>
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| Number of subspecialties with 3 or more indicators flagged |

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Page 1 of 2
The committee is interested in the teaching retreats or workshops you conduct for effective teaching methods. The three year pass rate is fine - do you have a five year pass rate available? Take care that those residents that work in the CARES clinic are either doing it under an elective rotation or have moonlighting approval. Resident cannot volunteer to work as MDs. 100% of your core faculty need to be involved with faculty development opportunities. Multiple innovative programs (My Tip evaluations, Quizzes during academic mornings, use of simulation, wellness curriculum)

Excellent answer to major changes on WEBADS List faculty alphabetically and then by site Did Dr. Savage retake boards in 2018? Check all faculty for retakes after 10 years Why are there zeros in # of approved ACGME positions (after faculty scholarly activity listing)? Scholarly activity is adequate for the resident, but it should be noted that none had a publication in the last year The program must get the faculty evaluations completed within two weeks of rotation up to 80%

The program mean is slightly below the national mean for all areas of both ACGME surveys

Action Plan is very thorough, addressing survey concerns with clear targets What are other programs your size doing for the operative vaginal deliveries minimums? If they cannot meet them, is there talk at the RRC level of reducing the number? If they are meeting them, why is it such a problem at our institution?
**Medical University of South Carolina - *GME Office**

**Duty Hours Violations report**

**Medical University of South Carolina - 1-2-19**

**Duty Hours Violations report: 80 Hours Per Week - Averaged Over A Four-Week Period**

**Reporting Period:** 07/01/2018 through 06/30/2019 (365 days)

**Maximum hours: 320 hours in 28 days (4 week)**

### Hematology-Oncology

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<tr>
<th>Trainee</th>
<th>Rotation Start</th>
<th>Rotation End</th>
<th>Hours Worked</th>
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### Obstetrics and Gynecology

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### Surgery

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### Internal Medicine

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Medical University of South Carolina - *GME Office
Duty Hours Violations report

Medical University of South Carolina - 1-2-19
Duty Hours Violations report: 80 Hours Per Week - Averaged Over A Four-Week Period
Reporting Period: 07/01/2018 through 06/30/2019 (365 days)

Maximum hours: 320 hours in 28 days (4 weeks)

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