I. PURPOSE / BACKGROUND

The purpose of this policy is to delineate City of Hope National Medical Center ("COHNMC") institutional requirements concerning the recruitment, eligibility and selection of residents and fellows, referred to as "Trainees" or "Graduate Medical Education ("GME") Trainees", to COHNMC residency and fellowship training programs. The Accreditation Council for Graduate Medical Education (ACGME) requires Sponsoring Institutions to have a policy for resident recruitment, matching, and appointment, and must monitor each program for compliance.

II. POLICY

A. ACGME-Accredited Programs:

1. City of Hope requires that its ACGME-accredited programs select from among eligible applicants on the basis of residency program-related criteria such as their preparedness, ability, aptitude, academic credentials, communication skills, and personal qualities such as motivation and integrity. ACGME-accredited programs must not discriminate with regard to sex, race, age, religion, color, national origin, disability, or any other applicable legally protected status.

B. Eligibility:

1. Each applicant must meet one of the following qualifications to be eligible for appointment to ACGME-accredited programs at COHNMC subject to additional qualifications as may be specified in specialty/subspecialty specific program requirements:
   a. Graduation from a medical school in the United States (U.S.) and Canada accredited by the Liaison Committee on Medical Education (LCME);
   b. Graduation from a college of osteopathic medicine in the U.S. accredited by the American Osteopathic Association (AOA); or
   c. Graduation from a medical school outside of the U.S. and Canada, and meeting one of the following conditions:
      1) Holds a currently valid certificate from the Educational Commission for Foreign Medical Graduates (ECFMG), or
      2) Has graduated from a medical school outside the U.S. and completed a Fifth Pathway program provided by an LCME-accredited medical school.

2. Must hold or be eligible to hold a full and unrestricted license to practice medicine in the
state of California, as issued by the Medical Board of California, or if Trainee is still within the first two years of training in an ACGME-accredited program, must obtain licensure from the MBC prior to Trainee’s 25th month of training. (If trainee is an International Medical School Graduate, trainee must obtain licensure prior to his/her 37th month of post-graduate training.)

3. City of Hope only accepts J-1 training visas and will not sponsor work visas (H1) for ACGME residents or fellows.

4. Individuals applying for ACGME Fellowship programs must document completion of an appropriate residency program to the GME office within sixty (60) days of completion, including an ACGME-accredited residency, or meet requirements as outlined in ACGME program requirements.

5. Programs may establish additional selection criteria. For example, determine specific passing scores for the USMLE. Specific criteria must be published for applicants to review as part of the required program-level policy on Eligibility and Selection.

6. Program Directors must comply with the criteria for resident eligibility as outlined above and as further specified by the ACGME Residency Review Committee (RRC). Trainees who are accepted into advanced year programs must successfully complete the RRC requirements prior to entering the program.

C. Selection:
   1. Selection from among eligible applicants is based on residency program-related criteria such as:
      a. City of Hope Graduate Medical Education programs participate in the National Resident Matching Program (NRMP), if applicable. Selection of house staff through the NRMP is preferable, when possible. When programs are enrolled in the NRMP, house staff members accepted outside the match must be approved by the Designated Institutional Official (DIO).
      b. All candidates for postgraduate training will submit a completed application with appropriate documentation of training and other materials requested.
      c. The program selection committee will rank the candidates for entrance into the NRMP, where appropriate, for selection based on qualifications.

D. Transfer of Residents:
   1. Trainees who transfer from another ACGME training program must meet the eligibility requirements noted above.
   2. Trainees who transfer into City of Hope must have the formal summative letter from their previous program(s) for the file. This includes trainees who have completed training or are transferring without completing previous training.

E. Financial Support, Benefits, and Conditions of Appointment:
   1. COH provides all appointed trainees with appropriate financial support and benefits to ensure each trainee is able to fulfill the responsibilities of their educational program(s).
   2. Candidates of COH training programs (applicants who are invited for an interview) are provided, in writing or by electronic means, information which includes the terms, conditions, and benefits of appointment, including financial support; vacations; parental, sick, and other leaves of absence; professional liability, hospitalization, health, disability and other insurance provided for the trainee and their family; and the conditions under which COH provides call rooms, meals, and laundry services.

F. Agreement of Appointment:
   1. COH provides each trainee with a written Training Agreement outlining the terms and
conditions of appointment. The GME Committee monitors the implementation of these terms and conditions. COH and the program directors ensure that trainees adhere to established practices, policies, and procedures in all institutions to which trainees are assigned. The Training Agreement includes or provides a reference to the following:

a. Trainees’ responsibilities;
b. Duration of appointment;
c. Financial support;
d. Conditions for reappointment and promotion to a subsequent PGY level;
e. Grievance procedures and due process;
f. Professional liability insurance;
g. Health and disability insurance;
h. Leaves of absence;
i. Duty Hours;
j. Moonlighting;
k. Counseling services;
l. Physician impairment;
m. Harassment;
n. Accommodation for Disabilities.

2. Restrictive Covenants: Neither COH nor its training programs may require ACGME trainees to sign a non-competition guarantee.

III. PROCEDURE

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<tr>
<th>RESPONSIBLE PERSON(S)/DEPT.</th>
<th>PROCEDURE</th>
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<tbody>
<tr>
<td>Owner: GME Institutional Coordinator</td>
<td>See Policy Section II, above, for procedural steps.</td>
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<tr>
<td>Collaborating Authors: Director, GME and Clinical Training, Chair, GMEC</td>
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<tr>
<td>Sponsor: Chief Medical Officer, DIO</td>
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Reference:
1. ACGME Website ([www.acgme.org](http://www.acgme.org))

Appendix One – Acronyms, Terms and Definitions Applicable to this Policy
1. Accreditation Council for Graduate Medical Education (ACGME) – The ACGME is responsible for the accreditation of post-MD medical training programs within the United States.
2. COHNMC – City of Hope National Medical Center, also referred to as City of Hope (“COH”), for purposes of this policy.
3. Designated Institutional Official (DIO) – The individual in a sponsoring institution who has the authority and responsibility for all of the ACGME-accredited GME programs.
4. Graduate Medical Education Committee (GMEC) – Graduate Medical Education Committee at City of Hope.
5. Medical Center – Refers to all facilities covered by City of Hope National Medical Center’s hospital license.
6. Trainee – A Resident or Fellow engaged in an ACGME-approved training or subspecialty program, which may be practicing at the Hospital in connection with an approved Affiliation Agreement governing his/her training at the Hospital.
7. USMLE – The United States Medical Licensing Examination® (USMLE®) is a three-step examination for medical licensure in the United States and is sponsored by the Federation of State Medical Boards (FSMB) and the National Board of Medical Examiners® (NBME®). The USMLE assesses a physician’s ability to apply knowledge, concepts, and principles, and to demonstrate fundamental patient-centered skills, that are important in health and disease and that constitute the basis of safe and effective patient care. Each of the three Steps of the USMLE complements the others; no Step can stand alone in the assessment of readiness for medical licensure.