



Ascension Saint Joseph-Chicago Podiatric Residency Manual - 2024/2025

Welcome to Ascension Saint Joseph-Chicago (ASJ-C). Our residency program functions best when each resident takes full responsibility for their duties and strives for a coordinated efficient group effort. It is everyone's job to ensure active participation while on rotations, timely patient rounding and full coverage for clinics and surgical cases. The important factors are providing optimum patient care, learning best practices and working as a team on which you may rely. Take advantage of each learning opportunity and respect your colleagues.

This document is subject to modification to improve learning, provide better patient care and address potential problems and concerns.

General Clinic Information:

- Clinical experiences offer important skills. You will work in several clinic settings and private practices. The attendings allow you to directly evaluate patients, make decisions, perform procedures, learn coding and develop good bedside manners.
- If you expect to be delayed or absent for any reason, notify both chief residents and the attending immediately.
- Always be attentive, ask questions and pay close attention to detail.
- If it's your first time attending a clinic, you must reach out to the attending to inquire about dress code and when to arrive at the location. You must arrive at least 15 minutes prior to the start of that clinic, if not earlier.
- Always wear a lab coat unless instructed otherwise and bring bandage scissors, pen, notepad and anything other items to prepare for the rotation.

General Surgical Case Information:

- Contact the attending at least 1 day prior to each case (it is never too early but the night before is definitely too late) to gather as much information as possible about the case. Ask about the patient history, imaging, planned surgical procedure, technique guides, incisional approaches, and any systems/instruments/biologics/products/etc. that they may be used during the case. Read or research the details of the proposed procedure, be prepared, and consider asking appropriate questions you may have prior to, during and after the case
 - o Example message: "Hello Dr. _____ I am _____, PGY-X from the Ascension Saint Joseph residency program. I am scheduled to assist your case tomorrow and wanted to reach out in advance to see if there is anything in particular that I may review to be better prepared for your case and if there are any instruments or products that should be ready in the OR prior to your arrival. Thank you."
- Ask and keep note of attendings' preferences, e.g., local anesthetics, pre-op antibiotics, post-op x-rays, post-op pain medication and antibiotics prescriptions, follow up visits, weight-bearing status, assistive devices or anything else that will help make the day go smoothly and demonstrate your willingness to go above and beyond basic duties. Show appreciation for the educational experience and opportunity to scrub their cases.
- Practice surgical skills such as suturing, hand-tying, controlled-depth incisions in the cadaver lab or at home. Ask fellow residents or attendings if there is something you do not understand, are uncertain about, or if they have suggestions for improvement in your surgical technique. Clearly, everyone had to learn from the beginning and gain experience from others.

- Log all cases, procedures, duty hours and activities on Podiatry Residency Resource on a daily basis.
- PGY-2s will update your assigned schedules twice daily (AM/PM). Updates will be posted in the group chat.
- It is mandatory to arrive at least 30 minutes prior to the case start time. Take into consideration traffic, weather conditions, distance, etc.
- Remember your professional role in the OR, be respectful to all colleagues, staff and support personnel. Inappropriate language, manners, actions and behavior is unacceptable and will not be tolerated.
- Case coverage is very important to maintain strong relationships with our large group of teaching faculty. Utilize the resident chat to arrange coverage if there is inadequate coverage. In the event cases go completely uncovered, notify the attending or reach out to senior residents to contact the attending.

Communication

- Answer and respond to all text, pages and phone calls in a timely manner (within a maximum 15 minutes). Acknowledge receipt of the message with an appropriate response.
- Communicate frequently, respectfully and openly with each other.
- Each resident has their own personal pager and shares the on-call pager. The pagers must NEVER be placed on silent/vibrate. Your pager must be with you at all times, with the exception of approved vacation. Immediately answer the page. If you are in surgery, ask the nurse to call in for you.
- We are a diverse group with unique perspectives. Do your best to work as a functional family. If you have a problem with a fellow resident, try to resolve the issue together. If you are unable to come to an agreement, talk to the Chief Resident or a PGY-3 for guidance. You are always welcome to approach the Program Director, Dr. Petrov. We are all professionals and want a comfortable and congenial environment, both at work and socially. Respect is essential to this goal. Let's each do our part.

Academics

- Academic sessions will be scheduled weekly or biweekly throughout the training years. Attendance is required by all residents. Supplemental sessions are scheduled on an *ad hoc* basis including weekend academics and laboratory sessions. Mandatory attendance is expected of all academic sessions.
- Excused absences may occur with surgical cases, clinic, rounding with an attending, ED cases or while actively working on an off-service month. Attendance is expected if there is no overlapping off-service shift.
- **If you expect to be late or absent for any reason, you must text both chief residents.**
- Attendance and active participation are recorded at each event.
- Each resident will be required to do a presentation (1 resident a month).
- The topic will be provided 1 month prior to the presentation.
- Attendance is also required at all Saturday lab sessions, unless excused by the Chiefs.
- Everyone must be prepared to actively participate during each event, and the majority of residents, if not each resident, should have at least one question, comment or an answer to a question during each of these events. That being said, we will be ensuring that the events are more conducive to learning by focusing more on our own program's growth, to allow for a more comfortable environment. Silence during a presentation or question/answer session is a waste of time for everyone. There is absolutely nothing wrong with mentioning an educated guess and providing some rationale for the response. We are all incorrect at some point, and learn from those experiences. The discussion prompted by any response is always positive and productive, adding to the educational event. The presenter also much appreciates a rapid response, indicating involvement in the discussion and attentiveness of the audience.
- When on rotations and in cases be mindful to collect radiographs and perioperative information to present comprehensive and interesting cases during academic sessions

Paid Time Off (PTO)

- When requesting PTO, an email, containing the below listed information, must be sent at least two weeks in advance to both Chief Residents, Dr. Petrov **and each resident that will be providing coverage for you:**
 1. The dates of requested PTO.
 2. The title of the assigned rotation during the requested dates.
 3. The name(s) of the resident(s) providing coverage, the dates of coverage the resident will be providing and which rotation that resident will be on at that time of coverage.
 4. Current residents with approved PTO on those dates.
 5. If no response is received regarding the PTO request, do not assume it is approved. Contact the Chiefs to check on the status of the request.
- Enter the scheduled time off in the Google residency calendar. If it's not on the Google calendar, the time off is not approved.
- Send a reminder notice email two days before the PTO to the entire group. Include dates off, the title of the rotation and the name of the covering resident.
- PTO during the last two weeks of June and the first two weeks of July is not allowed.
- Holidays are popular and requests will be granted based on **seniority** and require advanced notice. Avoid taking time off during short rotations or when there are few on-service residents.
- Must participate in **at least** 75% of the rotation.
- If PTO is requested by multiple residents at the same time, PTO will be granted based on seniority and then by first come first serve basis.
- Emergencies happen. We depend on each other. There will be times when you will be required to provide coverage, just as coverage will be provided for you when necessary.
- **PTO requests during call months will be evaluated independently in the Google Calendar.**
- The calendar must always be up-to-date for all surgical cases and PTO
 - Call residents are responsible for updates to SAH, SJH
 - Surgery center residents are responsible for updates to RMC, SFH, HFMC, Joliet, Aiden, Elmhurst, Belmont Harlem
 - PGY-3 residents are responsible for updating respective 3rd year rotation calendars
 - Chief residents are responsible for updating ABMC, SAMC
- Add your name to each case and if you are scrubbing as 1st or 2nd assist. This allows everyone to know your location.
- Calendar should be reviewed and updated daily, announcing gaps in coverage to the resident chat.
- Failure to comply with PTO rules (such as taking unapproved or unexcused time off) will result in the loss of a PTO day in addition to the missed day.

Students

- We were all students not so long ago, please treat the externs with respect. The reputation of the program spreads by word of mouth. An untoward event with a student may have serious effects on the standing of the program with potential residency applicants. We are constantly growing and improving the program. The experience of the students is a significant factor on the standing of the program.
- The PGY-2's coordinating the Academic calendar are in charge of setting up students for their monthly rotations, contacting them ahead of time, assigning their presentation topic and sending the academic calendar to each student.
- All residents must keep track of the performance, strengths and weaknesses, and personality traits of the students you work with while on rotation. This information is helpful during interviews.
- Send Dr. Petrov a monthly email with comments regarding the rotating students for that month.

Evaluations/PRR Logging

- An Evaluation form must be completed for all rotations. For surgery center rotations, select any attending to complete the form.
- Podiatry Residency Resource (PRR) logs must have a daily update.
- Ask the Program Director, Dr. Petrov, or a senior resident with any and all logging questions.
- PRR log review will be performed by Dr. Petrov and the Chief Residents on a monthly basis to ensure attainment of the Minimum Activity Volume and Diversity (MAC/Diversity) requirements.
- Every educational experience must be logged. This includes surgical procedures of any complexity, regardless of location or level of participation, office and inpatient experiences, and all medical, medical subspecialties, general surgical and surgical subspecialties, and emergency department experiences and procedures.
- Logs will be continually monitored and evaluated. If logs do not appear to be adequate and entered in a timely manner, disciplinary action will be taken.

PGY-1 Required Minimums to be achieved by the end of the PGY-1 training year:

Category 1-5 MAV cases	60
Comfortable with I&D's and Amputations	
Biomechanical Cases	50
Trauma cases	25
Podopediatric cases	25
Comprehensive H&Ps- Internal Medicine	50

PGY-2 Required Minimums

Category 1-5 MAV cases by December	140
Lower Extremity Wound Care	50
Complete MAV/Diversity requirements by June	
Comfortable with forefoot and ankle fractures	

PGY-3 Expectations

Exceed all MAV/Diversity requirements

These are the CPME required minimums from Document 320:

Minimum Activity Volume and Diversity Requirements for Graduation

Case Activities

Foot and ankle surgical cases (PMSR/RRA)	300
Trauma cases	50
Podopediatric cases	25
Other podiatric procedures	100
Lower extremity wound care	50
Biomechanical examinations	50
Comprehensive history and physical examinations	50

Procedure Activities

First and second assistant procedures (total) 400

First assistant procedures, including:

Digital	80
First Ray	60
Other Soft Tissue Foot Surgery	45
Other Osseous Foot Surgery	40
Reconstructive Rearfoot/Ankle	50

Call

- All cases, inpatients and on-call for SAH and SJH will be the responsibility of the PGY-2 and PGY-1 duo team.
- For the first rotation of on-call for the PGY-1's, both the PGY-1 and PGY-2 must respond to the call. Working as a team is the best way to learn and develop the ability to handle a variety of situations. All residents must feel confident and comfortable when on-call.
- The PGY-2 is responsible for determining the distribution of team duties for the PGY-1.
- If there are any questions, concerns or issues contact one of the Chief Residents.
- An attending must be contacted and spoken to about each and every patient that is admitted under the attending's name.
- PGY-2s have priority for cases at SJH and SAH. PGY-1s cover any cases the PGY-2s are not able to cover.
- PGY-1s will get cases, but please be patient. Where appropriate the PGY-1 and PGY-2 should double scrub. Any difficulty with this, call one of the Chiefs.
- Once the PGY-2 attains competence with a procedure, it is expected that the PGY-1 be allowed 1st assist for the procedure.
- If a PGY-1 rounds without a PGY-2, ensure they are in contact while still in the hospital to discuss the patient. This will often save you a trip back to the hospital. If the PGY-2 is unavailable, the PGY-1 must call/page a chief resident for advice, at any time, day or night.
- The PGY-1 must call your assigned PGY-2 and present the ED patient before contacting the attending on call. The PGY-2 will recommend treatment plans, labs, *etc.*, to be gathered before contacting the attending on call.
- PGY-2s are ultimately responsible, particularly if anything goes wrong.
- All new floor consults must be seen within 24 hours. If the patient is acute, the patient must be seen as soon as you get the consultation regardless of the time of day or night. Always check the patient list nightly when on call and make sure there are no new acute patients that need to be seen.
- ED consults take precedence over clinic coverage. The only exception to this is if you are actively scrubbing a case. Call the PGY-2 or a chief resident if you are uncertain about what to do or have any questions.
- Teamwork and helping each other is the key.
- If there are multiple cases at multiple training sites, and you need help covering cases/clinic, please let everyone know that you need help
- All residents are available to cover 24/7 unless they have an official day off. This is a family in which we help each other.
- From July to January, the PGY-1 on call should be slowly increasing coverage of the pager during weekdays. The PGY-1 must call their senior for all pages.
- After January, the PGY1's may begin taking some weekend call, 2 weekends a month maximum, calling the PGY-2 if unsure.
- PGY-2's must always be reachable and able to come to the hospital in a timely manner.
- If there are any issues contacting the PGY-2, call or page one of the chiefs any time day or night.
- Clinic duties:
 - Friday - one PGY-2 must always be at Dr. Dunn's clinic.
 - Monday - if available, call residents should help with Monday morning Dr. Dunn clinic. You must have your personal pager with you at all times (on or off service) and everyone must respond to all pages, if not you are required to respond to calls and texts immediately or within 10 minutes maximum, or the attending, Dr. Petrov and Dr. Rodriguez will need to be notified
- Be as thorough as possible in your history taking, physical examination, charting and make sure to chart review frequently.
- When ordering labs or imaging studies, make sure you inform the patient the reason for ordering the test and follow up if something is delayed or taking longer than expected. Never make assumptions. The follow-through may equate to more work, but you may catch something early that could have potentially devastating consequences for your patient's well-being.
- Communicate with other attendings, residents and staff regularly to ensure you are up to date on

- your patients at all times.
- This is your opportunity to be in control and have some autonomy, however bear in mind that the attending and patient are depending on you to do your best possible job for each patient under your care.
- The PGY-2 on-call must always be in town and available to go in 24/7, even if PGY-1 is on call. Emergent patients must be seen within the hour. Call must be shared equally among co-residents on call and a delayed response affects patient care and is unacceptable.
- Failure to distribute coverage evenly or respond to consults in a timely manner will be escalated to the Chief Residents and Dr. Petrov. Disciplinary action will be taken for repeat offenses.

Surgery Center

The following will be on SC each month:

- Surgery center calendar must be updated by noon on Friday for the following week and rechecked.
- Cases must be divided up by noon on Saturday.
- PGY-2 residents must check the schedules to which they are assigned twice daily (7 days a week) to keep the SC calendar up to date.
- Elmhurst, Belmont & Harlem, Aiden are to be checked once daily. SFH, RMC, HFMC, SAMC, and ABMC are to be checked twice daily (AM/PM).
- PGY-3 on Dr. Vajaria will have 1st choice on cases.
- PGY-3 on Dr. Patel will have 2nd choice on cases.
- PGY-3 on Dr. McKanna/Rodriguez will have 3rd choice on cases.
- PGY-3 on Dr. George will have 4th choice on cases.
- The remaining cases will be divided between the PGY-2's.
- **All cases must be covered by residents.**
- **As cases are added throughout the week, first priority goes to PGY-3's and PGY-2's, PGY-1's must cover any remaining cases.**
- **All add-on cases that are not covered by the PGY-3's Monday 7:00 a.m. through Friday at 6:00 pm must be covered by PGY-2's.**
- Friday 6:00 p.m. through Monday 7:00 a.m., the on-call resident for SC will be responsible for uncovered and add-on cases. If a PGY-1 is on call and cannot go to the hospital with the add on case (ABMC), the PGY-2 on secondary call must cover those cases.
- Secondary call is considered call so you **must be available for add on cases** or PTO will be taken.
- PTO may only be taken during your call weekend (Saturday & Sunday) with adequate coverage.
- The final training schedule will be distributed in July.
- Complication trauma - try to accommodate with level appropriate coverage. Calcaneal fracture - PGY-3.
- Gas gangrene, bunion, hammer toe, I&D, abscess – PGY-1 & 2.
- All scheduled and add-on cases at RMC, ABMC and SAMC for Drs. Choi, Kirchens, Zemela and Husain are to be covered by the PGY-1 on Wound Care at that time. If there is no PGY-1 on WC, the SC team will cover.
- If you do not have a case, you are highly encouraged to 2nd assist with another resident (this includes PGY-3's). Text the weekend/night before and ask if a 2nd assist is appropriate for the case.
- Attendings who do not allow two residents - Drs. Charnota, Patel and Peterson.
- Failure to distribute coverage evenly, arrive punctually, or miss cases when available will be met escalated to the Chief Residents and Dr. Petrov. Disciplinary action will be taken for repeat offenses.

PGY-1

Podiatric Clinic

During this month, your main focus is becoming comfortable in private practice clinics. You are required to be at the clinic every day unless the Attending has canceled the clinic or you are on PTO (pre-approved and **have coverage**).

Day	Attending	Location	Time	Attire
Monday	Dunn	SAH	9:00 to 12:00	Scrubs
Tuesday	Metz / 3 rd year clinic	Parkwest / 3 rd year clinic	10:00 to 5:00	White coat
Wednesday	Metz / 3 rd year clinic	Parkwest / 3 rd year clinic	10:00 to 5:00	White coat
Thursday	McKanna/Reed	Itasca		
Friday a.m.	Surgical Cases			
Friday p.m.	Dunn	SAH	1:00 to 5:00	Scrubs

Surgery coverage and double scrubbing is expected if a clinic is canceled.

- Friday Dunn clinic: The PGY-2 on-call will be at this clinic with you. There must always be a PGY-1 & 2 at the clinic unless emergent case coverage is required. Please arrange adequate coverage from the team in this event.
- Weekends: No clinics
- The resident on Clinic is in charge of covering Safety Huddle at 8:30am daily.**
If you are unable to attend the Huddle, it is your responsibility to have another resident cover the meeting.
Worst case scenario, email Trish the night before that the podiatry is unable to attend and provide a report or let her know there is nothing to report.
Safety Huddle is mandatory and a priority. Set alarms on your phone/watch to make sure you don't forget.

Call

- Until January, the PGY-1's on-call will slowly start covering the pager on weekdays. The PGY-1 shall call the senior for all pages.
- After January, the PGY-1 may begin taking some weekend call, **2 weekends a month maximum**, calling the senior, as needed, if unsure of the situation. PGY-2 and PGY-1's must round together on more complicated cases for learning purposes.
- The PGY-2 on-call must always be in town and available to go in 24/7, even if PGY-1 is on call

Off Service

- Your first priority is the off-service rotation. There should be no absence from these rotations to cover Podiatric obligations. However, if you are already off and there are cases/clinic that need coverage you may ask a PGY-2 to cover.
- Check with the PGY-2 or attending of the off-service rotation about the weekly academic and lab schedule.

Psych, Anes, Endo, IM, WC, Radiology

- Psychiatry 2 weeks each
- Anesthesia 2 weeks
- Endocrine 2 weeks
- Internal Medicine 6 weeks

- Wound Care 3 weeks
- Radiology 2 weeks

Please refer to rotation PowerPoints for any additional questions or concerns.

PGY-2

Podiatry Surgery Resident

- Podiatry surgery resident rotation is designed to provide early hands-on involvement with PGY-2 residents.
- Your primary duties are to provide case coverage, assist the on-call team, and supplement coverage in clinics in that order of importance.
- Podiatry Surgery residents will be included in surgery center group chats and review weekly case schedules with senior residents and provide coverage.
- When there are no assigned 1st-assist cases, you are required to double scrub with the call team/SC team and assist with rounding and patient consults. If there is no assigned duty, please contact your Chief Residents to be assigned cases or responsibilities for the day.
- Clinic duties (order of importance):
 - Friday Dr. Dunn PM Clinic SAH
 - Monday Dr. Dunn AM Clinic SAH
 - Dr. Rodriguez Clinic Thursday
 - Dr. McKanna/Dr. Reed Clinic Monday and Wednesday
 - Drs. Reilly/Sinclair/Ferryanto's office
 - Other Clinics to be added

Call

- The majority of call is your responsibility. It is your job to teach and guide the PGY-1's to round, cover call, work the EMR systems and become comfortable in the OR.
- The first month of call, the PGY-1's on-call should be slowly covering the pager during weekdays. The PGY-1 must call the PGY-2 for all pages.
- The second month of call, the PGY-1 may begin taking some weekend call, 2 weekends a month maximum, calling the PGY-2 if unsure of how to proceed with the patient.
- The PGY-2 on-call must be in town and available to go in 24/7.
- Please be gentle, understanding and encouraging of new PGY-1's and refer any problems to the Chiefs or Dr. Petrov.
- If you see something untoward, immediately call for a time-out and privately make this correction a teaching moment benefiting all involved and not making a scene. Let the Chiefs and Dr. Petrov know of the circumstances as soon as possible.
- Friday afternoon-one PGY-2 and one PGY-1 must be at Dr. Dunn's clinic at SAH.
- General Surgery - 2-week rotation at St. Joseph Hospital Work with the Gen Surg residents Monday-Saturday
- Vascular Surgery - 2-week rotation
- Emergency Department
- Please check rotation PowerPoints for further information

PGY-3

- Chiefs will be available at all times for all questions from any resident. They are the go-to person for questions about anything, as is Dr. Petrov.
- Dr. George - all clinic and cases– Fourth choice at all SC.
- Dr. Patel - all cases and clinic Tuesday p.m. or Friday clinic. Will also cover Dr. Peterson cases– Second choice at all SC.
- Dr. Rodriguez/McKanna - all cases and clinic - Third choice at all SC.
- Itasca - all cases and clinic Tuesday and Wednesday.
- Dr. Vajaria/SC- all Vajaria cases – First choice at all SC.

- Goal: Achieve all MAVs and Diversity requirements March 1st.

Disciplinary Actions:

- Residents should strive to fulfill resident duties to the best of their abilities. We come together from different backgrounds with unique perspectives to make the program function well. The operation of the program depends on active participation, a willingness to learn, and dedication to one another.
- In the event a resident is not fulfilling their resident duties disciplinary actions will be taken
 - Required duties are outlined in this manual or determined at the discretion of the program director and assistant director.
- The resident will first receive a verbal warning of violation of conduct, followed by a written warning of violation of conduct.
- Repeated offenses will be escalated and may result in remediation of rotation, institution of a Performance Improvement Plan (PIP), and possible non-promotion into the next training year or termination, as allowed by Ascension Policy.
- Please reach out to your senior resident or director to address any concerns you have about individual performance concerns before it affects your training and the residency.

Acknowledgement of Receipt of the Podiatric Residency Manual 2024-2025

I, _____ understand the requirements and expectations outlined by the Podiatric Residency Manual. I acknowledge receipt of a printed copy of the policies and agree to abide by the requirements outlined within.

I understand that should I have questions regarding podiatric residency policies, I will consult with my immediate supervisor or Human Resources personnel.

*Note to employees: Please read the uniform policy carefully to ensure that you understand the policy before signing this document.

Employee Signature: _____

Employee Printed Name: _____

Date: _____

Witness: _____