

## **ROLE OF THE CHIEF RESIDENT(S)**

The chief residents are directly responsible to the attending physicians on each of the services. Their duties include but are not limited to the following:

1. Supervise junior residents care of patients and operating room procedures
2. The chief resident(s) will work closely with the program director and site chiefs on administrative arrangements
3. Round with junior residents, medical students, and attending staff surgeon(s)
4. Draft monthly (block) call schedule and distribute
5. Provides home call coverage when core/PGY1 (off-service residents) are assigned to call (second call) as back up (when 2 chiefs per year)
6. Arrange service coverage for all vacation & meeting leave request, with approval of Program Director
7. Coordinate and direct medical student, elective students and residents to provide service with minimal delay
8. Be in attendance at all operative procedures when on call
9. Ensure attendance of a resident at the weekly resident/ER clinic with the post call surgeon
10. Select monthly journal articles and assign residents
11. Participate in the peer teaching and provide teaching to medical students on service
12. Present M&M and Quality Assurance conferences at scheduled times throughout the year.
13. It is the chief resident's responsibility, under the supervision of the Program Director, to assign duties to the junior resident (s), to organize the surgical schedule, to prepare for daily rounds with the training director and other appropriate faculty, to maintain a liaison with other relevant services, to arrange clinic coverage and to provide consultation if necessary
14. The chief resident(s) is expected to organize the service and assign junior resident functions with the goal of an efficient management of the in-patient and outpatient services.

## **OTHER SPECIFIC CHIEF/SENIOR RESIDENT RESPONSIBILITIES**

1. When the chief/senior resident is assigned to the transplant service, the chief/senior will be the primary operator with the clinical associate in place as a second assist.
2. When no resident is on the transplant service, the chief/senior resident is to meet with Dr Todd and/or Dr Moore to plan expectations over that block. Residents will still be involved on scrubbing with transplants during those blocks as assign be the chief/senior resident.
3. Active participation in medical student instruction is expected.
4. Organize and collect bi-annual faculty evaluations
5. The chief resident(s) will work closely with the program director and site chiefs on administrative arrangements