## PGY7 Graduated Independence Grid\*\*\*

Updated 7/2022

Faculty will be in-house and available throughout the fellow's shift (except for Tier 4)

In Tier 2+, will function as attending—admitting patients and booking OR cases under their own name, evaluating and staffing all inpatients, traumas and consults, and attesting resident notes.

At regular intervals, the fellow's **tier** will be re-assessed by the faculty. Fellow is responsible for reminding attending of their current tier and its meaning at the start of each duty period.

## If the attending is present for a trauma, OR case or consult, then the attending will sign the chart for that case instead of the fellow.

	Tier 1	Tier 2	Tier 3	Tier 4		
	Est. August	Est. September	Est. Dec			
Rounds	Faculty sees patients and signs notes (can & should be separate from team). Should see ~4 most complex patients w fellow daily	Faculty runs list with fellow MORNING and AFTERNOON, personally sees any complex patients at fellow or faculty discretion. Fellow signs notes.	Faculty discusses/evaluates complex patients with fellow at fellow request; faculty must be in- house	Same as Tier 3, except faculty may be off-campus available by phone		
Trauma Yellow	Faculty present	Call PRN	Call PRN	Call PRN Faculty at home		
Trauma Red not hypotensive	Faculty present	Call PRN	Call PRN	Call PRN Faculty at home		
Trauma Red with hypotension	Faculty present	Faculty present	Call PRN	Call PRN Faculty at home		
Trauma OR case	Faculty present	Faculty present at start, may leave if patient stable	Notify attending of case  Faculty present only on request	Notify attending of case Faculty at home		
General Surgery OR case	Faculty present	Notify faculty of case Faculty present only on request	Notify attending of case Faculty present only on request	Notify attending if complex case (ie other than appy/chole) Faculty at home		
Regardless of level, fellows are expected to escalate care to attending on call if patient care or						

Regardless of level, fellows are expected to escalate care to attending on call if patient care or case load exceeds fellow capabilities.

Impending mortality for	Notify faculty for brief discussion	Notify faculty for brief discussion	Notify faculty for brief discussion	Notify faculty for brief
any reason (Other than				discussion
patient on comfort care)				

## \*\*\*ESCALTION OF CARE

There is always a faculty member and back up faculty member on call with the fellow for escalation, which is done by phone or in person conversation; and either fellow or faculty can be the one to initiate the escalation.

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