Policy Statement

As members of the University of South Florida College of Medicine, residents in training are provided professional liability protection by the USF Health Sciences Center Self-Insurance Program (SIP) created by the College of Medicine and endorsed by the Board of Directors of the University and the Board of Governors of the State of Florida for the benefit of the USF Health Sciences Center, its faculty, students, and other employees.

USF College of Medicine residents are immune to personal liability for negligence when acting within the course and scope of their employment within the College, including “tail coverage” for delayed events.

A full description of the terms and conditions of the protections provided by SIP can be obtained from the USF Health Sciences Center Self-Insurance Program Office.

It is essential that residents give immediate notice upon becoming aware of any incident that may expose themselves and the SIP to any loss. The failure to provide prompt notice of incidents is a prime contributor to physicians being named in malpractice suits that should have been resolved well in advance of litigation. Timely notice of incidents enables the SIP to gather information and arrive at an early determination of the merits of the claim or possible claim.

The best guideline to follow is medical common sense sustained by an ever-present awareness of the possibility of a claim. The standard practice should be: when in doubt, always report, and do so promptly.

Procedure

<table>
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<tr>
<th>Responsible Party</th>
<th>Action</th>
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<tr>
<td>Resident</td>
<td>Provides prompt notice of a reportable incident to the SIP Office at 813/974-8008. Guidelines for reportable incidents follows.</td>
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No definition of a reportable incident will cover all circumstances. In general, however, reportable incidents fall into three broad categories:

1. Any incident in which a patient has sustained an iatrogenic injury that was not anticipated by the physician or patient.
2. Any of the injuries listed below. Though there may appear to be no departure from accepted standard of practice, these cases should be reported:

a. Death – unexpected or unexplained.
b. Paralysis, paraplegia or quadriplegia.
c. Spinal cord injury.
d. Nerve injury or neurological deficit.
e. Brain damage.
f. Total or partial loss of limb, or loss of the use of limb.
g. Sensory organ or reproduction organ loss or impairment.
h. Injury which results in disability or disfigurement.

3. All incidents in the broad categories listed below should be reported:

a. Any injury to the mother or baby associated with birth.
b. Any patient injury resulting from defective or nonfunctioning medical equipment.
c. Any injury to parts of the anatomy not undergoing treatment.
d. Any claim by a patient or family member that a patient has been medically injured.
e. Any assertion by the patient or family that no consent for treatment was given.
f. Any increase in morbidity due to misdiagnosis.

By far the best guideline to follow is that of medical common sense sustained by an ever-present awareness of the possibility of a claim. The standard practice should be: when in doubt, always report, and do so promptly.

The Self-Insurance Program office @ 813/974-8008 should be notified immediately in each of the following situations:

1. Receipt of any correspondence from any source, attorney, patient, or third party, making an inquiry in connection with a claim or intent to initiate malpractice action.

2. Receipt by a faculty member, resident or employee of a Summons, Complaint, or other legal documents in connection with a claim.

3. Inquiry about any case by the Florida Department of Business and Professional Regulation (DBPR).
The Self-Insurance Program staff works to protect University physicians. Any attitude other than full cooperation could jeopardize physicians and the Self-Insurance Program. Further information may be obtained from the following individuals:

John Liston, Self-Insurance Program Administrator
Tel: 813/974-8008

SIP Office

Establishes incident reporting procedures.

Reviews all incidents for the purposes of evaluating the loss potential of each. Upon a determination that an incident exposes the SIP to a potential loss, established an investigation file and initiates an investigation.

Establishes a Claims Management Committee to review all potential and active claims protected under the SIP.

Establishes a claims file for all incidents which expose the SIP to an indemnity or expense loss. Posts a provisional reserve for presentation to the SIP Council for approval or revision.

Ensures Claims Management Committee reviews all claims for the purpose of identifying risk factors which may be subject to avoidance or reduction by the appropriate risk management techniques and makes recommendations to eliminate or reduce the frequency of patient injury incidents.

Contracts with an attorney or attorneys to provide legal defense for parties and risk protected by the SIP in accordance with the SIP's Memorandum of Protection.
APPROVED:

[Signature]

Associate Dean, Graduate Medical Education

[Signature]

Dean, College of Medicine

c: p& liaibility insurance

REVIEWS, REVISED, REISSUED 6/05
REVIEWS, REVISED, APPROVED - 8/2008