



SCOPE OF PRACTICE

Dermatology Residency Program
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University of South Florida

This document pertains to resident rotations under the auspices of the *Dermatology Residency Program at Tampa General Hospital, Moffitt Cancer Center, James A. Haley Veterans' Hospital, Florida Hospital-Tampa, Morsani Center for Healthcare, 17 Davis Cosmetic and Laser Center*. All Accreditation Council of Graduate Medical Education (ACGME), Joint Commission (JC), Agency for Health Care Administration (AHCA), and CMS guidelines pertaining to graduate medical education apply to this scope of practice.

The purpose of this policy is to ensure that residents are provided adequate and appropriate levels of supervision during the course of the educational training experience and to ensure that patient care continues to be delivered in a safe manner. The privilege of progressive authority and responsibility, conditional independence, and a supervisory role in patient care delegated to each resident is assigned by the program director and faculty members to ensure effective oversight of resident supervision.

Each resident must know the limits of his/her scope of authority and the circumstances under which he/she is permitted to act with conditional independence. Residents are responsible for asking for help from the supervising physician *under any circumstance in which the resident/fellow feels uncomfortable*. Supervision may be provided by more senior residents in addition to attendings. However, all patient care must be provided under a credentialed and privileged attending physician. The attending physician is ultimately responsible for management of the individual patients and the supervision of the residents involved in the care of the patient. Supervision must be documented in the medical record in accordance with Dermatology at the University of South Florida compliance guidelines.

The program follows the ACGME classification of supervision as noted below. The supervising physician can refer to a faculty, fellow, or resident that who has been given supervisory privilege. These supervisory levels are used throughout the Scope of Practice document.

Direct Supervision The supervising physician is physically present with the resident and patient.

Indirect Supervision

- 1) With Direct Supervision Immediately Available – The supervising physician is physically within the hospital or other site of patient care and is immediately available to provide direct supervision.
- 2) With Direct Supervision Available – The supervising physician is not physically present within the hospital or other site of patient care but is immediately available by means of telephonic and/or electronic modalities and is available to provide direct supervision.

Oversight

The supervising physician is available to provide review of procedures/encounters with feedback after care is delivered.

The residency program has a curriculum for providing knowledge and performance competence that includes *routine teaching sessions and mentoring*. While direct patient evaluation is a core procedure, this is evaluated via direct evaluation during each clinic session. There are no diagnostic/therapeutic procedures that require competence or evaluation as part of this fellowship. Annual decisions about competence are made by the program’s clinical competency committee to ensure a successful transition and preparation for the next PGY level. All residents need to maintain current ACLS training.

	Supervising Physician present (Direct)	Supervising Physician in hospital and available for consultation (Indirect but direct supervision immediately available)	Supervising Physician out of hospital but available by phone or can come in (Indirect but direct supervision available)	The trainee may perform the procedure without supervising Attending/ resident (oversight)			
Designated Levels	1	2	3	4			
CORE PROCEDURES – FOR OUTPATIENT					PGY-2	PGY-3	PGY-4
Diagnosis and treatment of common dermatologic disease					2	3	3
KOH preps and Tzanck preps					2	3	3
Skin biopsies including shave, punch and excisional					2	4	4
Cryosurgery and electrosurgery					2	3	3
Minor skin surgery including simple elliptical excisions with layered closure and more advanced cases such as grafts and adjacent tissue transfer as appropriate					2	3	3
Perform patient care and procedures in the outpatient setting					2	3	4
Diagnosis and treatment of more advanced dermatopathologic entities (e.g. consults from primary care physicians)					2	3	3
Chemoexfoliations and superficial chemical peels					N/A	3	4

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Designated Levels	1	2	3	4			
More advanced surgical cases including elliptical excisions, adjacent tissue transfer and grafts					2	3	4
Diagnosis and treatment of complex dermatologic disorders (e.g. consults from dermatologists)					2	2	3
Dermatologic cosmetic procedures including sclerotherapy, injection of fillers, and medium and deep chemical peels					1	3	3
Laser surgery					1	1	3
Advanced skin surgical cases including those treated by Mohs surgery followed by reconstruction utilizing complicated adjacent tissue transfers, flaps and grafts					2	2	3
All hospital admissions are done under the auspices of medicine, such decision are handled through the medical department and their staff.					USF Internal Medicine	USF Internal Medicine	USF Internal Medicine
CORE PROCEDURES FOR INPATIENT					PGY-2	PGY-3	PGY-4
Diagnosis and recommendations for treatment of dermatologic disorders presenting in hospital in-patients					2	3	4
Provide consultations within the scope of his/her privileges					2	3	4
SEDATION					PGY-2	PGY-3	PGY-4
Local anesthesia					3	3	4
Floor Procedures					PGY-2	PGY-3	PGY-4
Shave skin biopsy					3	3	4

	Supervising Physician present (Direct)	Supervising Physician in hospital and available for consultation (Indirect but direct supervision immediately available)	Supervising Physician out of hospital but available by phone or can come in (Indirect but direct supervision available)	The trainee may perform the procedure without supervising Attending/resident (oversight)			
Designated Levels	1	2	3	4			
Punch skin biopsy					3	3	4
Excisional skin biopsy					3	3	4
Cryosurgery					3	3	4

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