I. Policy on Resident Eligibility and Selection *Revised 8/12/2026*

I. References

In accordance with Section IV.B of the ACGME Institutional Requirements, the Sponsoring Institution must have written policies and procedures for resident recruitment, selection, eligibility, and appointment consistent with ACGME Institutional and Common Program Requirements, and Recognition Requirements (if applicable), and must monitor each of its ACGME-accredited programs for compliance.

II. Definitions

1. Resident: an individual enrolled in a residency or fellowship program. For purposes of this Policy and the School of Medicine's additional GME Policies, "resident" includes "fellow," an individual enrolled in a fellowship (subspecialty) program sponsored by the School of Medicine who has completed a residency program in a related specialty.

2. Residency Program/residency program: For purposes of this policy, "residency program" includes: 1) an ACGME-accredited residency or fellowship program sponsored by Tulane University School of Medicine; 2) a Non-Standard Training (NST) program providing clinical training for foreign national physicians in advanced subspecialty programs for which there is no ACGME accreditation or American Board of Medical Specialties member board certification; and 3) Non-ACGME accredited post-graduate training program in a highly specialized sub-specialty field. Formal ACGME accreditation may not be offered or accreditation may be in areas overseen by independent specialty societies instead. Non-ACGME program fellows holding faculty appointments are subject to relevant School of Medicine policies regarding faculty.

3. Program Director: refers to the director of a residency or fellowship Program.

4. DIO: Designated Institutional Official; has the authority and responsibility for all Tulane University School of Medicine residency and fellowship programs. The DIO at the School of Medicine also has the title of Associate Dean of Graduate Medical Education.

5. International Medical Graduate (IMG): a physician who completed their basic medical degree or qualification from a medical school located outside the United States and Canada. Their status depends entirely on the location of their medical school, not their country of birth, country of citizenship, or their host country residency status.

6. Foreign National Physician: a physician who holds citizenship in a country other than the one where they are practicing or training, requiring specific legal status or visas. Foreign National Physicians who trained abroad must typically receive ECFMG Certification and secure visa sponsorship (such as J-1 or H-1B) to practice or complete residency programs in the United States.

7. J-1 Visa: a non-immigrant, work- and study-based exchange visitor visa used by individuals to teach, study, conduct research, or receive training in the United States.

8. H-1B Visa: a temporary, employer-sponsored U.S. work visa that allows companies to hire foreign professionals in specialized fields.

III. Policy

A. Resident Eligibility – ACGME Accredited Program

1. To be eligible for appointment to an ACGME-accredited residency program sponsored by Tulane University School of Medicine (the "School of Medicine") applicants must meet one of the following qualifications:
    a. Be a graduate from a medical school in the United States or Canada that is accredited by the Liaison Committee on Medical Education (LCME); or,
    b. Be a graduate from a college of osteopathic medicine in the United States or Canada that is accredited by the American Osteopathic Association (AOA); or,
    c. Be a graduate from a medical school outside of the United States or Canada and meet one of the following additional qualifications:
        i. Holds a currently valid certificate from the Educational Commission for Foreign Medical Graduates (ECFMG) prior to appointment; or
        ii. Holds a full and unrestricted license to practice medicine in the state of Louisiana, as issued by the Louisiana State Board of Medical Examiners (LSBME).
2. Subject to more specific requirements that may be set by an ACGME Review Committee applicable to the program, all prerequisite post-graduate clinical education required for initial entry or transfer into an ACGME-accredited residency program needs to be completed in ACGME-accredited residency programs, AOA-approved residency programs, Royal College of Physicians and Surgeons of Canada (RCPSC)-accredited or College of Family Physicians of Canada (CFPC)-accredited residency programs in Canada, or in residency programs with ACGME International (ACGME-I) Advanced Specialty Accreditation.
3. Upon matriculation, the residency program must receive verification of each resident's level of competency in the required clinical field using ACGME Milestones, or, if permitted by the program's ACGME Review Committee, using CanMEDS, or ACGME-I Milestones evaluations, from the prior training program. The ACGME Review Committee for each residency program may further specify prerequisite postgraduate clinical education.
4. Physicians who have completed a residency program that is not accredited by the ACGME, AOA, RCPSC, CFPC or ACGME-I (with Advanced Specialty Accreditation) may enter an ACGME-accredited residency program in the same specialty at the PGY-1 level and, at the discretion of the Program Director and with approval by the GMEC, may be advanced to the PGY-2 level based on the ACGME Milestones evaluations of the residency program. This section of the Policy applies only to entry into a residency program in those specialties for which an initial clinical year is not required for entry.
5. To the extent permitted by a residency program's Review Committee, an exceptionally qualified international graduate applicant who does not satisfy the eligibility requirements set forth above, may be accepted by a School of Medicine residency program in accordance with the conditions set forth in the ACGME's Common Program Requirements, including review and approval of the applicant's exceptional qualifications by the GMEC. Any

exceptionally qualified international graduate applicant accepted through this exception shall have an evaluation of their performance by the residency program's Clinical Competency Committee within 12 weeks of matriculation

B. International Medical Graduates and Foreign National Physicians

The School of Medicine welcomes applications from International Medical Graduates (IMG) and Foreign National Physicians who meet the clinical and academic standards required to enter U.S. residency or fellowship training programs. Certification by the Educational Commission for Foreign Medical Graduates (ECFMG) is mandatory for IMG and Foreign National Physician applicants, as per Accreditation Council for Graduate Medical Education (ACGME) requirements.

1. The School of Medicine will consider a qualified ECFMG-certified and sponsored IMG applicant or a Foreign National Physician applicant on a J-1 visa for acceptance into its residency and fellowship programs. The School of Medicine generally does not sponsor work visas (H1-B) for graduate medical education but may consider limited exceptions to this policy with DIO approval prior to the rank list process.

2. A Program Director must consult with the GME Office and the Tulane University Office of Institutional Students and Scholars (OISS) before extending an offer to a trainee seeking H1-B visa sponsorship. Limited exceptions for enrolling H1-B visa applicants will be considered only for fellowship and residency programs where there is a proven shortage of qualified domestic applicants, ECFMG-certified IMGs, or Foreign National Physicians on J-1 visas. As part of the request for DIO approval, a program seeking to sponsor an international medical graduate through the H1-B work visa process must adhere to the following guidelines, including providing the requested attestations and information for DIO consideration:
    a. Request DIO approval prior to the rank list process.
    b. Attest that a rank list irrespective of visa status of applicants was developed.
    c. Describe the exceptional institutional and/or program benefit to sponsoring an H1-B visa for a particular trainee.
    d. Provide the number and status of trainees on visas of any type currently in the program.
    e. Provide the salary to be offered to the applicant for review and approval.
    f. Provide the exact costs for sponsoring the H1-B visa, inclusive of all required fees.
    g. Confirm that the Program Director has discussed the sponsorship costs and all required fees with the Department Chair and received approval to proceed with a request to the DIO for approval.
    h. Explain any other extenuating circumstances to support the request for approval.

3. If a program receives DIO approval to hire an H1-B visa holder, the program and/or its home clinical department are responsible for all associated costs and required fees for H1-B visa sponsorship. An H1-B visa applicant is not responsible for any government application fees, including expedited processing fees, associated with the visa process.

4. Other Visas: Applicants on other types of visas or work authorizations may be considered for hire with prior consultation by the Program Director with the DIO, GME Office, and the OISS. Program Directors MUST obtain written approval from the DIO to hire other visa types PRIOR to including the candidate on their NRMP rank list or offering them a position outside of the match.

C. Resident Selection

1. School of Medicine residency programs select residents from among eligible applicants on the basis of their preparedness, aptitude, academic credentials, personal qualities consistent with excellence in medicine (e.g., motivation, honesty, and integrity), ability to communicate, demonstrated commitment to fostering equity, diversity and inclusion in medicine and ability to benefit from the education of the residency program.
2. School of Medicine graduate medical education residency programs participate in the National Residency Matching Program (NRMP or "the Match") in selecting residents, with the exceptions of the Urology and Ophthalmology programs, which select residents through the San Francisco Matching Program ("SF Match"), and the hematopathology, cytopathology, dermatopathology, and preventive medicine fellowships which do not have nationally organized residency match programs.
3. Applicant characteristics may be assessed by reviewing the applicant's Electronic Residency Application Service (ERAS) application or an equivalent application form. A residency program's review may include, but is not limited to, the following:
    a. The applicant's letter of recommendation from the Dean of the applicant's medical school.
    b. The applicant's letters of recommendation from medical school faculty.
    c. The applicant's personal letters of recommendation.
    d. The applicant's medical school transcript and grades.
    e. The applicant's ECFMG certification notice if applicable.
    f. The applicant's National Board of Medical Examiners (NBME) (i.e., United States Medical Licensing Exam (USMLE)) or COMLEX scores.
    g. The applicant's scholarly and community service record.
    h. The applicant's noteworthy achievements, humanistic qualities, personal qualities consistent with excellence in medicine and qualities important to the desired specialty; and/or
    i. The applicant's evaluation from those who interview the applicant on the date of their interview with the residency program.
4. The School of Medicine considers all candidates for graduate medical education regardless of race, sex, creed, nationality, national origin, disability, sexual orientation, or other legally protected status.
5. Each residency program must provide a copy of the resident contract available in Appendix C to applicants during the interview process and programs must post a copy

of the resident contract on their website. Information that is provided in the resident contract must include:

a. The terms, conditions, and benefits of appointment to the residency program, either in effect at the time of the interview or that will be in effect at the time of the applicant's eventual appointment.

b. Stipends, benefits, vacation, leaves of absence, professional liability coverage, and disability insurance accessible to residents; and

c. Health insurance accessible to residents and their eligible dependents.

d. The additional information set forth in Section E of this Policy.

6. Selected residents must obtain a license or permit through the Louisiana State Board of Medical Examiners and satisfy the LSBME background check standards to train in any School of Medicine residency program. Residents selected and training in a residency program that rotates at the Southeast Louisiana Veterans System (VA) may be required to go through additional background checks, as part of the onboarding process to rotate at the VA. Drug testing currently is not required by the School of Medicine but clinical partners may employ random drug-testing at participating sites.

D. Recruiting of Residents Outside of the Match

1. Programs that participate in an organized match (the Match and SF Match), are bound by the conditions of the agreement with that organization. No applicant to a residency program who is also a participant in an organized match can be accepted into a residency program at the School of Medicine outside of the terms of that match process even if the recruiting program does not participate in the respective organized match. Any deviations from matching procedures and practices may necessitate receiving a waiver from the organized match. Neither applicants nor programs may release each other from a binding match commitment.

2. Match rules govern when positions unfilled after the match process may be subsequently filled outside of the organized match. For the Match, unfilled positions may not be filled until the close of the Supplemental Offer and Acceptance Program (SOAP). Resident selection criteria, outlined in Section B, above, continue to apply to the selection of residents outside of a match program.

3. Hematopathology, cytopathology, dermatopathology, and other programs which do not have a nationally organized match must select fellows in accordance with the criteria outlined in Section B, above.

4. Program Directors who wish to add additional residents to their program through complement increases and/or vacancies in a program from a resident or fellow leaving during the time of the year when an organized match is not in effect (i.e., off cycle) must send a formal request to the DIO, including the information outlined in the *Policy on Closure, Reduction, or Expansion*.

5. No resident may be enrolled in a training program outside of the above noted match procedures without prior approval of the DIO. A program, through the program's

clinical department, which enrolls a resident off cycle or otherwise outside of a match (excluding fellows to programs without an organized match program), without the prior approval of the DIO will be financially responsible for the resident throughout the resident's training. Enrolling residents off cycle or outside of a match may result in a reduction in the program's match number for subsequent years or in a match violation.

6. Before accepting a resident who is transferring from another program, the Program Director must obtain written or electronic verification of previous educational experiences and a summative competency-based performance evaluation of the transferring resident, and Milestones evaluations upon matriculation.

E. Recruitment of Residents Between Residency Programs within the School of Medicine

1. When a position in a School of Medicine residency program is or will become vacant, the program may advertise the vacancy within the School of Medicine and its intent to fill the position, after receiving written approval from the DIO.
2. A resident who is interested, but who is currently under contract in another School of Medicine residency program, may only apply for the open position if the resident is not currently bound by a binding commitment through an organized match, such as the Match (or has received a written waiver from the matching program before applying).
3. The resident applicant must disclose to the Program Director for the recruiting program any contractual obligation that currently exists to the resident's current School of Medicine residency program and disclose to the resident's current Program Director their intention to pursue the open position.
4. The Program Director and faculty from the recruiting School of Medicine residency program must not initiate, entice, or negotiate with a candidate from another School of Medicine program until the resident's current Program Director has given written approval for the program to contact the resident.
5. Before the resident can be offered the open position, a letter of intent to release the resident from their contractual obligation must be received from the current Program Director. The recruiting Program Director must also receive written or electronic verification of the resident's previous educational experiences and a summative competency-based performance evaluation prior to acceptance of the resident and the Milestones evaluations.
6. The resident's current Program Director must also approve the start date for the resident in the new program.
7. The DIO, or the DIO's designee, will serve as the mediator in any situation in which the School of Medicine Program Directors cannot reach an amicable resolution to the resident wishing to switch programs.
8. Failure to abide by the rules set forth in this section may result in a reduction in the program's complement for the following year.

F. Agreement of Resident Appointment/Contract

1. Residents who match to a School of Medicine ACGME-accredited or Non-Standard Training (NST) program must be sent the resident contract that outlines the terms and conditions of employment as a resident at Tulane. This contract will be mailed to the applicant within two weeks of the match results. Residents employed outside of an organized match or off cycle will also receive the contract within two weeks of the program extending an offer for employment. The resident contract currently in effect is available in Appendix C.
2. The resident agreement of appointment/contract must comply with ACGME Institutional Requirements and the School of Medicine's requirements for employment. With the exception of the resident's start and finish date (the term of the contract), the resident contract cannot be modified without the written permission of the DIO, in consultation with the Office of General Counsel or GMEC as appropriate. The contract shall contain or provide a direct link to:
    a. Resident responsibilities.
    b. Duration of appointment.
    c. Financial support for residents.
    d. Conditions for reappointment and promotion, including criteria for non-renewal and non-promotion.
    e. Grievance procedures and due process.
    f. Professional liability insurance, including a summary of pertinent information regarding coverage.
    g. Health insurance benefits for residents and their eligible dependents and disability insurance for residents.
    h. Vacation, parental, sick, and other leave(s) of absence, compliant with all applicable laws, including timely notice of the effect of a leave on the ability of residents to satisfy requirements for program completion.
    i. Information related to eligibility for specialty board examinations; and
    j. School of Medicine policies related to resident clinical and educational work hours, moonlighting, resident wellness, and assistance, harassment, and accommodations for disabilities.
3. Each resident contract requires the signature of the resident, the Program Director, the departmental Chair, and the DIO, on behalf of The Administrators of the Tulane Educational Fund. Payroll will not authorize the resident's first payment until the DIO has signed the resident's contract.
4. Contracts for residents are extended on a yearly basis. A new contract must be initiated each year.

5. In accordance with the *Policy on Non-Competition*, neither the School of Medicine nor any of its ACGME-accredited residency or NST programs will require a resident to sign a non-competition guarantee or restrictive covenant.
6. The PGY status listed in the resident's contract shall be based upon the PGY level routinely held for that position in the program (e.g., a first-year resident will be paid as a PGY-1 status, a first-year cardiology fellow will be paid as a PGY-4 status, etc.) regardless of the resident's years of past training.

G. Residents Transferring to another Program Outside of the School of Medicine

1. In the event that a resident enrolled in a residency program sponsored by the School of Medicine transfers to a residency program outside of the School of Medicine prior to the resident's completion of their education at the School of Medicine, the resident's Program Director must provide to the accepting residency program, written or electronic verification of the resident's previous educational experiences and a summative competency-based performance evaluation and the Milestones evaluations.

H. Completion of USMLE or COMLEX Examinations

1. The USMLE Step 2 Clinical Knowledge (CK) and Clinical Skills (CS) tests or COMLEX equivalent(s) must be passed prior to matriculation into a residency program.
2. STEP 3 should be passed by December 31st of the PGY-2 year of residency training. Failure to pass STEP 3 by December 31st may result in a formal letter of non-renewal of contract for the upcoming academic year. This requirement also applies to residents beginning a School of Medicine residency program in program year two (PGY-2).
3. An applicant who has failed Step 2 or Step 3 (e.g., for international or transferring residents) of the USMLE more than three times, even if the examination is subsequently passed, is ineligible for enrollment in a School of Medicine residency program.
4. Any current School of Medicine resident who fails to take Step 3 by June 30th of the PGY-2 year of training will be placed on an immediate leave of absence without pay in accordance with the *Policy on Remediation, Suspension, Dismissal and Grievance,* said leave of absence without pay to begin on July 1st of the PGY-3 year. This is a reportable event on the training record. The leave of absence will remain in effect until Step 3 has been taken and the Program Director receives the supporting documentation that the resident has taken and passed the exam. A revised start date will subsequently be determined.
5. No resident may advance into PGY-3 of training unless the resident has passed Step 3.

I. Resident Rotations Outside of the School of Medicine's Participating Sites

To provide additional educational experiences or assignments, residents may occasionally be permitted to rotate to a residency program outside School of Medicine participating sites. All external rotations undertaken for training credit must be approved in advance by the

resident's Program Director in accordance with ACGME specialty guidelines and program and institutional policies.

1. For all external rotations, the Program Director must complete the "External Rotation Site Request" form (or RIGHT program form if applicable) that includes the PD's signature of approval, reasons why the requested experience cannot be met at a current Tulane SOM clinical partner (LCMC, Ochsner, VA) hospital site, a summary of the educational objectives and their relevancy to the training program requirements, the scope of the activities to be covered in the rotation, the length of the rotation, and whether the experience meets an ACGME or other applicable accrediting body requirement as relevant and will be counted toward ACGME/board-creditable training, is for elective credit only, or non-credit enrichment.
2. Because School of Medicine resident salaries and benefits (including malpractice insurance) are paid by the hospital at which the resident rotates, salary and benefits are not paid for rotations outside of School of Medicine affiliated hospitals/institutions. Therefore, a resident seeking to do a rotation at an external training location is responsible for ensuring that their salary and benefits, including malpractice insurance, is paid for by the receiving training location or another external source. Residents may choose to forgo salary/benefits during this time or use vacation time to support an external rotation; however, the resident is still responsible for confirming and verifying to the Program Director and GME Office upon request that the resident will have professional liability insurance for the entire rotation at the external site.
3. The School of Medicine will not authorize the transfer of any of its resident FTE caps to support a resident's external rotation.
4. **Domestic External Rotations**: To receive ACGME training credit for domestic external rotations the rotation:
    a. Must be supervised or overseen by the resident's accredited program and meet ACGME participating site requirements.
    b. Must meet an ACGME or other applicable accrediting body requirement as relevant and is counted toward assuring the graduate's board eligibility (if applicable) and required months of training to complete the program.
    c. Must represent a significant educational opportunity that cannot be obtained at the SOM's partner clinical sites.
    d. Participation does not extend the length of the resident's training program.
    e. Participation does not negatively impact the training of residents and fellows in Tulane's GME programs.
    f. Participation does not negatively impact patient care.
    g. An Affiliation Agreement and Program Letter of Agreement (PLA) has been approved and signed by all necessary parties (e.g., Site Director, Program Director, DIO, and Dean) prior to the start of the rotation.
5. **International Rotations**: Residents electing international rotations for training credit should review the proposed rotation with their Program Director to ensure the rotation

does not negatively impact their training, i.e., length of training, ability to sit for boards, etc., meets their specialty and/or certification board requirements, and follows institutional requirements, policies, and guidelines as approved by the GME Office and the University's Office of the Provost**.**

6. Residents seeking to participate in "Resident Initiative in Global Health Training" (RIGHT) program rotations should consult with the RIGHT program and the GME Office for additional requirements and guidelines.
7. To receive ACGME training credit for international rotations, including those sponsored by the RIGHT program, the following requirements must be met:
    a. The training program's accreditation status permits international travel.
    b. The rotation represents a significant educational opportunity that cannot be obtained at the SOM's partner clinical sites.
    c. The activity does not extend the length of the resident/fellow's training program.
    d. Participation in the activity does not negatively impact the training of residents and fellows in Tulane's GME programs.
    e. Participation in the activity does not negatively impact patient care.
    f. The Program Director has sought and received all required written approvals for the rotation from the relevant ACGME program Review Committee and/or specialty/subspecialty board in advance and submitted a copy to the GME Office.
    g. The Program Director has completed and obtained all required signatures on a Program Letter of Agreement (PLA) with the site specifying the rotation's educational objectives and goals, including the supervising faculty, educational content, duration, evaluation expectations, and governing policies/procedures.
    h. If the resident or fellow is on a visa, the necessary Intealth paperwork has been completed and submitted to the GME Office
    i. The resident/fellow meets with the Director of Tulane University's Global Operations to review information on high-risk travel locations, vaccinations, travel clinics for immunizations, emergencies abroad (Crisis24), International Health Insurance and other travel-related information and contacts.
    j. The trainee has provided written confirmation to the Program Director and GME Office that health insurance, malpractice/professional liability, evacuation coverage, and travel support/funding have been obtained or is in place.

J. Auxiliary Learners

1. Auxiliary learners are learners that are not residents in the residency program but include residents from other specialties and/or residency programs, subspecialty fellows, PhD students, pharmacology students, nurse practitioners, and other health care learners. Auxiliary learners must enhance and not interfere with the education of residents appointed in the residency program.
2. Program must report circumstances when the presence of other learners interferes with the residents' education to the DIO and to the GMEC.

3. The Program Director must approve the presence of all auxiliary learners. If, in the Program Director's discretion, the presence of auxiliary learners dilutes or compromises the training of residents in their residency program, the Program Director may end the participation of auxiliary learners within the training environment.

K. Visiting Resident Rotations at a School of Medicine Participating Site

1. Visiting residents are residents who are currently enrolled in an ACGME-accredited residency program at a Sponsoring Institution other than the School of Medicine.
2. The Program Director of the School of Medicine residency program in which the visiting resident seeks to rotate, the GME Office, and the SOM's clinical partner(s) must approve the rotation to ensure that the presence of the visiting resident enhances and does not disrupt the educational experience of the residency program's appointed residents. Permission for a visiting rotation must be obtained a minimum of 90 days before the start of the proposed rotation.
3. The visiting resident's Sponsoring Institution must financially support the resident, including salary, benefits, and professional liability insurance, while the resident is rotating in a School of Medicine sponsored residency program.
    a. If the visiting resident's Sponsoring Institution is seeking Medicare GME payments for the external rotator, the graduate medical education office for the external rotator must arrange a resident FTE cap transfer with the hospital at which the resident will rotate. The rotation terms and the corresponding payments will be exchanged between the external rotator's sponsoring institution and the hospital. The role of the GME Office is to approve the rotation, not to facilitate the contract between the external rotator's Sponsoring Institution and the hospital.
    b. If the visiting resident's Sponsoring Institution is not seeking Medicare GME payments for the external resident, the external resident's Sponsoring Institution must assume all financial responsibility for the resident, including salary, benefits, and malpractice insurance.
4. The procedure for a visiting resident to apply for a rotation within the School of Medicine is as follows:
    a. The receiving Program Director must approve the rotation.
    b. The DIO and GME Office must be informed of how the visiting resident will be funded and must approve the rotation.
    c. The receiving Program Coordinator will be responsible for the appropriate credentialing of the resident for their respective rotation(s), which will include:
        i. Verification of approval from the visiting resident's Sponsoring Institution.
        ii. Verification of malpractice insurance.
        iii. Assuring the appropriate orientation for the hospital/clinic rotations at which the visiting resident will rotate.

iv. Completing appropriate forms (TB testing, etc.) as required by the hospital at which the visiting resident will rotate.

v. Obtaining a hospital ID card.

vi. Arranging for parking/beeper and other required amenities.

vii. Ensuring the visiting resident has been trained in all applicable School of Medicine and affiliated hospital policies, including but not limited to, HIPAA training and compliance and Electronic Medical Record (EMR) training;

viii. Ensuring appropriate evaluation forms are returned to the rotator's sponsoring institution; and

ix. Communicating with the hospital at which the visiting resident will rotate that the resident is currently visiting with the residency program and ensuring that the hospital has all necessary forms/credentials.

5. An affiliation agreement outlining the legal responsibilities of both the Tulane School of Medicine and the visiting resident's Sponsoring Institution must be completed and signed by Tulane's DIO, and Dean and the corresponding and appropriate representatives of the visiting resident's Sponsoring Institution, a minimum of three (3) months prior to the proposed start date of the rotation.

6. Once the visiting resident has complied with these procedures, for the purposes of hospital credentialing, the visiting resident will be considered a part of the Tulane residency program for the time that the visiting resident rotates at the School of Medicine's affiliated hospital. All School of Medicine policies and procedures that apply to School of Medicine residents apply to visiting residents during the visitor's time with the School of Medicine, including, but not limited to, grievance and supervision policies.

7. The GME Office is not responsible for the credentialing of a visiting resident. The receiving Program Coordinator and Program Director are responsible for communicating with the resident's home Sponsoring Institution and for providing all required completed documentation to the GME Office for processing with clinical partner(s).

8. Programs must report circumstances when the presence of a visiting resident interferes with the residents' education to the DIO and to the GMEC.

C. Requirements for Appointment in Nonstandard Training (NST) programs

NST programs provide clinical training for Foreign National Physicians in advanced subspecialty programs for which there is no ACGME accreditation or American Board of Medical Specialties member board certification. Foreign National Physicians receive J-1 visas sponsored by the Educational Commission for Foreign Medical Graduates (ECFMG) to enable their participation in NST programs. Applicants appointed to positions in NST programs must meet the eligibility criteria outlined in the NST program description and policies. As the Sponsoring Institution for graduate medical education, the School of Medicine is recognized by the ACGME to offer Nonstandard Training (NST) programs for

J-1 visa holders sponsored by the Educational Commission for Foreign Medical Graduates (ECFMG). The DIO and GMEC have oversight responsibility and authority over NST programs and must approve all applications to establish NST programs at the Tulane School of Medicine.

1. Program seeking to establish a Non Standard Training program must complete an NST Training Program application and submit to the GME Office for review and approval by the DIO and GMEC a minimum of 3 months in advance of the proposed program start date.

2. Each NST program must have written eligibility criteria for the program and must make the information available to applicants. The program must verify that applicants meet eligibility requirements prior to appointment by assessing the applicant's prior education and clinical experience against the program's requirements, and evaluating whether the trainee's education, experience, and qualifications satisfy the program's published prerequisites. Assessment includes review of application correspondence, credentials (education, degree, licensure, certification, etc.), training history, interviews, and other program-specific qualifications.

3. The GME Office will review appointment documentation for all NST program appointees to ensure that institutional requirements are met and advise the program director to seek approval of the DIO/GMEC or other University offices if needed for exceptions.

L. Non-ACGME-Accredited Training Programs Post residency or fellowship trainees who have previously completed training in an ACGME-accredited program may seek to engage in additional clinical training in a non-ACGME accredited program. Such programs may be recognized and accredited by individual specialties.

1. To meet institutional accreditation requirements, programs seeking to create a non-ACGME accredited program must complete a "Non-ACGME Accredited Program" application and submit to the GME Office for review and consideration by the DIO and GMEC at least 90 days in advance of the proposed program start date.

2. The Program Director is responsible for ensuring that a program trainee's presence enhances and does not disrupt the educational experience of the trainees in any ACGME-accredited training programs. Trainees in non-ACGME accredited programs may be removed from a rotation at any time at the discretion of the Program Director or the DIO, if their presence is found to diminish the educational experience of residents in an accredited program.

3. If a non-ACGME accredited trainee has a faculty appointment while simultaneously participating in a non-accredited training program, credentialing is the responsibility of the program's department and the hospital credentialing committee.

4. The department Chair and/or Program Director are responsible for ensuring that the non-ACGME accredited trainee complies with all applicable School of Medicine and affiliated hospital policies, including but not limited to, HIPAA training and compliance.

5. The rights afforded to residents in ACGME-accredited training programs are extended to non-accredited trainees, including but not limited to, due process and grievance. However, fellows in non ACGME-accredited programs with faculty appointments are subject to faculty governance policies.

IV. References/Associated Policies

- Tulane University School of Medicine, Graduate Medical Education *Appendix C: Sample Contract*
- Tulane University School of Medicine, Graduate Medical Education *III. Policy on Closure, Reduction or Expansion*
- Tulane University School of Medicine, Graduate Medical Education *XV. Policy on Remediation, Suspension, Dismissal and Grievance*
- Tulane University School of Medicine Graduate Medical Education *II. Policy on Visiting Residents and Observerships*
- Tulane University School of Medicine, Graduate Medical Education *XXV. Policy on Non-Competition*