

## **STANDARD OPERATING PROCEDURE- POLICY**

### **UROGYNECOLOGY PATIENT ROUNDING**

#### **SCOPE/APPLICABILITY:**

We always seek to provide excellent care for our patients that also enhances the learning of trainees at the University of New Mexico, and want this to serve as a document that guides which trainees would care for patients that are admitted and/or postoperative under the care of the Urogynecology service.

This policy applies to patients that are admitted or consulted upon under the care of a Urogynecologist in the Department of Obstetrics & Gynecology at the University of New Mexico Hospital (UNMH) or at Sandoval Regional Medical Center (SRMC).

#### **PURPOSE:**

The purpose of this policy is to describe who has the responsibility to round on or evaluate patients that are admitted under the care of an Urogynecologist in the Department of Obstetrics & Gynecology at the University Of New Mexico Hospital (UNMH) and/or at Sandoval Regional Medical Center (SRMC).

#### **DEFINITIONS:**

N/A

#### **PROCEDURE:**

All procedures are meant to preserve 1) continuity of care and 2) ensure that no patient that might be a learning opportunity for a trainee at the University of New Mexico is not part of learning.

#### **UNIVERSITY OF NEW MEXICO HOSPITAL (UNMH) UROGYNECOLOGY ROUNDING**

The order of call for rounding on patients at UNMH during NORMAL, DAYTIME HOURS (6a-6p M-F) shall be as follows. This indicates that if the person on the list is not available or cannot feasibly round on the patient on the requested date or time, then the next person on the list would be expected to do so:

- 2nd year (PGY2) on the Urogynecology UNMH rotation\*
- Chief (PGY4) on the Urogynecology UNMH rotation\*
- 2nd year (PGY2) at UNMH L&D (who is assigned to the GYN Resident TigerConnect role) in consultation with the GYN Ward attending\*\*\*
- Chief (PGY4) on UNMH L&D (who supervises the PGY2 assigned to the GYN Resident TigerConnect role)
- Intern (PGY1) on UNMH L&D in consultation with the GYN Ward attending\*\*\*
- Resident covering Maternal-Fetal Medicine (MFM PGY2 or PGY3) for UNMH

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\*The chief (PGY4) on the Urogynecology UNMH rotation has the authority to delegate rounding to their 2nd year (PGY2) or choose evaluate the patient themselves depending on what better preserves continuity of care (e.g., if the PGY4 was in the operation for the patient, they may wish to round on the patient themselves if available).

\*\*\*If the PGY2 on L&D at UNMH (who is assigned to the GYN Resident TigerConnect role) or the PGY1 (intern) on L&D is utilized for rounding on Urogynecology patients, the GYN Ward attending should be made aware of them being utilized in this role for Urogyn rounding, so that the GYN Ward attending can aid them in balancing and triaging responsibilities for that morning/day.

A Urogynecology Fellow (typically the UNMH Urogynecology rotation fellow or an off-service fellow if the UNMH fellow is not available) will round on all post-surgical patients or Urogynecology service patients REGARDLESS OF AND IN ADDITION TO the resident that is rounding based on the chain of command above. The resident that is rounding should communicate with the relevant fellow rounding with them regarding the best way to coordinate care and maintain continuity. In addition, the Urogynecology attending (typically the attending that operated on or originally consulted on the patient, but possibly the attending on call, if different) will round on all post-surgical patients or Urogynecology service patients REGARDLESS OF AND IN ADDITION TO the resident and fellow that are rounding based on the chain of command above.

If the resident that is not on a typical Urogynecology rotation is asked to round due to the unavailability of the Urogynecology resident (PGY2 or PGY4), they are expected to do so unless it would compromise the clinical care of other, more urgent patients. If they are unable to round due to needing to care for more critical, urgent patients on other services, then they are responsible for communicating to the NEXT person in line that Urogynecology rounding is now their responsibility. If a resident fails to meet Urogynecology rounding responsibilities without adequate justification, then the attending(s) and fellow(s) on the Urogynecology service reserve the right to withdraw the privilege of operating with the Urogynecology team from that resident they next time that opportunity would arise for them.

For weekend UNMH rounding, the resident expected to round on any Urogynecology inpatients (post-surgical or consultations being followed) will typically be the post-nights PGY-2 on L&D. The order of call for rounding on patients at UNMH during weekends shall be as follows. This indicates that if the person on the list is not available or cannot feasibly evaluate the patient on the requested date or time, then the next person on the list would be expected to do so:

- Post-nights PGY-2 on Labor and Delivery (who was assigned to the GYN Resident TigerConnect role), rounding at the end of their shift prior to going home
- Urogynecology Fellow on call during the relevant weekend
- Urogynecology Attending on call during the relevant weekend

For more details on weekend rounding at UNMH, please also refer to the UNMH Resident Weekend rounding Standard Operating Procedures.

### UNMH UROGYNECOLOGY CONSULTATIONS

The order of call for performing inpatient or Emergency Room (ER) consultations for UNMH during NORMAL, DAYTIME HOURS (6a-6p M-F) shall be as follows at UNM Hospital. Typically, the 2nd year (PGY2) who is assigned to the OB-GYN Resident New Consult/Admit TigerConnect role will triage this consultation and determine, in consultation with the L&D chief and GYN Ward attending, that this is an appropriate consultation to be evaluated by Urogynecology. If it is after business hours (not 6a-6p M-F), they would determine if the consultation could wait until normal business hours or must be performed urgently. They would then contact the first person on this list or, if not available or during a time when they are not on duty (vacation, weekend, etc.), the next person in line to consult on an Urogynecology patient. This list indicates that if the person on the list is not available or cannot feasibly evaluate the patient on the requested date or time, then the next person on the list would be expected to do so:

- 2nd year (PGY2) on the Urogynecology UNMH rotation
- Chief (PGY4) on the Urogynecology UNMH rotation
- 2nd year (PGY2) at UNMH L&D (who is assigned to the GYN Resident TigerConnect role)
- Chief (PGY4) on UNMH L&D (who supervises the PGY2 assigned to the GYN Resident TigerConnect role)

After the relevant consult has been evaluated by a resident from the chain of command above, and it has been determined that the consultation is appropriate for Urogynecology evaluation, the following two individuals will be contacted to come and evaluate the patient IN ADDITION TO AND REGARDLESS OF THE RESIDENT THAT EVALUATED THEM:

- Urogynecology Fellow on UNMH Urogynecology rotation
- Urogynecology attending on call (TigerConnect Role)

In the unlikely event that it is determined by the person taking the call from the Emergency Room (ER) or hospital floor that an evaluation by Urogynecology is needed URGENTLY, no resident is available to assess the patient due to other patient care duties, and is not during daytime, business hours (nights or weekends), then the Urogynecology Fellow on call (TigerConnect Role) will be contacted to see the patient urgently.

The Urogynecology Fellow will only assess the patient prior to or not in addition to a resident if there is NO RESIDENT AVAILABLE TO URGENTLY ASSESS THE PATIENT DUE TO OTHER CARE DUTIES. As urgent need for Urogynecologic care, such as a postoperative complication, regardless of time of day or night, is a resident learning opportunity, failure of residents to assess an urgent patient in need of Urogynecologic care for any reason OTHER than need to assess and care for MORE URGENT PATIENT MATTERS will be considered a failure to meet job responsibilities. The resident that fails to assess a patient prior to or in concert with

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the Urogynecologic team on call for any reason other than an urgent need to care for other patients may be denied the opportunity to operate with the Urogynecologic team the next time the opportunity would come to them.

#### SANDOVAL REGIONAL MEDICAL CENTER (SRMC) ROUNDING

The order of call for rounding on patients at SRMC during NORMAL, DAYTIME HOURS (6a-6p M-F) shall be as follows. This indicates that if the person on the list is not available or cannot feasibly evaluate the patient on the requested date or time, then the next person on the list would be expected to do so:

- 2nd year (PGY2) on the SRMC Gyn rotation
- Urogynecology Fellow on the SRMC service
- Relevant attending who admitted or is caring for patient

For weekend SRMC rounding, a resident is not expected to round on the patient, unless the resident themselves is caring for the patient and wishes to do so for their own learning and continuity of care. The order of call for rounding on patients at SRMC during weekends shall be as follows. This indicates that if the person on the list is not available or cannot feasibly evaluate the patient on the requested date or time, then the next person on the list would be expected to do so:

- Urogynecology Fellow on call during the relevant weekend (TigerConnect Role)
- Urogynecology Attending on call during the relevant weekend (TigerConnect Role)

#### SANDOVAL REGIONAL MEDICAL CENTER (SRMC) UROGYNECOLOGY CONSULTATIONS

The order of call for performing inpatient or Emergency Room (ER) consultations for Urogynecology care from SRMC shall be as follows for normal business hours (6a-6p on M-F). This list indicates that if the person on the list is not available or cannot feasibly evaluate the patient on the requested date or time, then the next person on the list would be expected to do so:

- 2nd year (PGY2) on the SRMC Gyn rotation
- Urogynecology Fellow on call (TigerConnect Role)
- Urogynecology attending on call (TigerConnect Role)

The order of call for performing inpatient or Emergency Room (ER) consultations for Urogynecology care from SRMC shall be as follows for non-normal business hours (not 6a-6p M-F). This list indicates that if the person on the list is not available or cannot feasibly evaluate the patient on the requested date or time, then the next person on the list would be expected to do so:

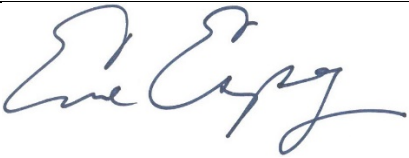
- Urogynecology Fellow on call (TigerConnect Role)
- Urogynecology attending on call (TigerConnect Role)

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**APPROVALS:**

SOP Owner:	Peter Jeppson, MD	Date: 05/06/2021
Chair Approval:		Date: 06/15/2021
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