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Welcome

Welcome to Mercy Medical Center – Des Moines and the Department of Medical Education & Research.

The Vision of Mercy Medical Center – Des Moines’ Graduate Medical Education Program is: *To produce board-certified physicians through innovative and competency-based education and leadership experiences.*

Our department offers four residency programs and one fellowship program.

**Family Medicine** – This three-year ACGME program offers a continuity clinic that is the result of a partnership between Primary Health Care, Inc. and Mercy Medical Center – Des Moines. There are eight residents at each postgraduate level.

**General Surgery** – This five-year AOA program is a non-pyramidal general surgery program, with four residents at each postgraduate level.

**Internal Medicine** – This three-year ACGME residency program is a partnership between Primary Health Care, Inc. and Mercy Medical Center – Des Moines. There are 10 residents at each postgraduate level.

**Psychiatry** – This four-year ACGME residency program begins fall 2018 with it’s first class of four residents. This is a collaborative effort between Mercy Des Moines and the Iowa Department of Public Health.

**Plastics & Reconstructive Surgery** – This three-year AOA program has one fellow at each postgraduate level. The program accepted their first fellow in July 2014.

Because Mercy is a regional tertiary care hospital, you will be involved in caring for complex medical cases. As a result, you will develop close working relationships with highly-skilled medical specialists and staff from many specialty areas. We believe you will receive an unsurpassed educational experience that will offer you the best opportunity to master skills and succeed in your future medical endeavors.

We are glad you are here!
The Mercy Organization

History of the Sisters of Mercy
The Religious Order of the Sisters of Mercy (RSM) was founded by Mother Mary Catherine McAuley, who along with a group of young women established a House of Mercy in Dublin, Ireland in 1827. Their mission was to provide shelter and education to young, unemployed women. Mother McAuley and her co-workers soon extended their work to the care of orphans, education of children, and the care of the sick and aged.

The Sisters of Mercy, at the request of the Bishops of America, came to the United States in 1840 and established their first convent in Pittsburgh, Pennsylvania. The community grew rapidly and convents of Mercy soon spread throughout the country. There are currently nine provinces of the Sisters of Mercy in the United States and the Province Generalate is located in Maryland.

Mother Mary Baptista Martin and four other Sisters came to Des Moines, Iowa from Davenport, Iowa to found a hospital. On December 8, 1893, they opened Mercy Hospital in temporary quarters (two private rooms and a ward for five persons) in what is now known as Hoyt Sherman Place at 15th and Woodland Avenue.

Mercy Medical Center – Des Moines
Mercy Medical Center – Des Moines is a not-for-profit Catholic hospital situated on four campuses, with a total of 875 beds, along with more than 20 additional facilities that house more than 50 primary care, pediatric, internal medicine and specialty clinics.

Founded by the Sisters of Mercy in 1893, Mercy is the longest continually operating hospital in Des Moines. It also is one of the largest employers in the state, with more than 7000 employees and a medical staff of more than 1000 physicians and allied health associates. Mercy is also one of the Midwest’s largest referral centers, offering a variety of specialty services that are unique to Iowa and the region.

Mission
*Working together in the Spirit of Mercy to improve the wellbeing of people in our communities by living the values of: Reverence, Integrity, Compassion, and Excellence.*

Vision
*To be the leading integrated health system in central Iowa with a statewide collaborative network.*
Values
- **Reverence**: Profound respect and awe for all of creation, the foundation that shapes spirituality, our relationships with others and our journey to God.

- **Integrity**: Moral wholeness, soundness, fidelity, trust, truthfulness in all we do.

- **Compassion**: Solidarity with one another’s capacity to enter into another’s joy and sorrow.

- **Excellence**: Preeminent performance, becoming the benchmark, putting forth our personal and professional best.

**Mercy Health Network (MHN)**
Mercy Health Network (MHN) is a statewide system founded in 1998 under a joint operating agreement between two of the largest Catholic, not-for-profit health organizations in the United States: Catholic Health Initiatives, based in Denver, Colorado, and Trinity Health, based in Novi, Michigan. This agreement is comprised of 11 owned and 26 contract-affiliated hospitals, and 142 physician clinics with 625 physicians. MHN is based in Des Moines and includes the Mercy Medical Centers in Des Moines, Sioux City, Mason City, Dubuque and Clinton. It also includes owned community hospitals in Centerville, Dyersville, New Hampton, Newton, Primghar, West Des Moines, and Oakland, Nebraska.

**Catholic Health Initiatives (CHI)**
Mercy Medical Center is a member of Catholic Health Initiatives. Catholic Health Initiatives is a national nonprofit health organization with headquarters in Englewood, Colo. The faith-based system operates in 19 states and includes 105 hospitals and multiple other facilities and services.

**CHI Mission**
To nurture the healing ministry of the Church by bringing new life, energy, and viability in the 21st century. Fidelity to the Gospel urges us to emphasize human dignity and social justice as we move toward the creation of healthier communities.

**CHI Vision**
To create a national Catholic ministry that will live out its mission by transforming traditional health care delivery and creating new ministries that promote healthy communities.

**Iowa Medical Education Collaborative**
A collaborative agreement between Mercy Medical Center and Primary Health Care (PHC), the Iowa Medical Education Collaborative (IMEC) serves as a sponsor for Graduate Medical Education.
PHC is a Federally Qualified Health Center (FQHC) that receives federal grant support from the Health Resources and Services Administration (HRSA) within the U.S. Department of Health and Human Services (DHHS), to provide, or arrange for the provision of, high quality, cost-effective, community-based comprehensive primary and preventive health care and related services to medically underserved communities in Des Moines and surrounding communities, regardless of the individual’s or family’s ability to pay for such services. PHC serves as the continuity clinic site for residents participating in family medicine and internal medicine residency programs.
General Information

Staff of Medical Education & Research

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Office</th>
<th>Cell</th>
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<tbody>
<tr>
<td>Lauri Allen</td>
<td>Medical Education Coordinator</td>
<td>643-8505</td>
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<tr>
<td>Susan Allender</td>
<td>Research Coordinator</td>
<td>643-7459</td>
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<td>Deb Bagnall</td>
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<td>Jude Enos</td>
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<td>Jenni Grandgeorge</td>
<td>Professional Development Coord.</td>
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<td>515-249-6855</td>
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<tr>
<td>Abby Hubbard</td>
<td>Residency Coordinator, FM</td>
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<td></td>
</tr>
<tr>
<td>Fay Jakymec</td>
<td>Residency Coordinator, Psychiatry</td>
<td>643-2630</td>
<td></td>
</tr>
<tr>
<td>Charles Keller, MD</td>
<td>Interim Chief Medical Officer, DIO</td>
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<tr>
<td>Andrea Sondgeroth</td>
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</tr>
<tr>
<td>Teri Swenson, PharmD</td>
<td>Pharmacist – FM Residency</td>
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</tr>
<tr>
<td>Lori Wahman</td>
<td>Residency Coordinator, IM</td>
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<td>515-360-0512</td>
</tr>
<tr>
<td>Marcie White</td>
<td>Library Assistant</td>
<td>247-4189</td>
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General Department Phone Number 643-8678

Program Directors

- Bryan Folkers, D.O., FACOS: Program Director, Plastics Fellowship
- Jan Franko, MD, PhD, FACS: Program Director, General Surgery Residency
- Sasha Khosravi, DO: Program Director, Psychiatry Residency
- Dean Moews, M.D. FACFP: Program Director, Family Medicine Residency
- Leatrice Olson, D.O., FACOI: Program Director, Internal Medicine Residency

Stipend Deposit

Your stipend will be deposited biweekly on Friday at the bank of your choice. You will need to complete the information for the direct deposit as part of your benefits enrollment (you can complete this during orientation). See appendix A for pay period and pay dates.

Housing Allowance

First year residents will receive an annual housing allowance of $5000, payable in twenty-six (26) biweekly payments. This allowance will be included in your biweekly stipend check. New residents will receive a one-time payment of $1000 towards expenses, which will be paid on your first or second paycheck.

Food Services

Meals are provided for residents while on duty. You will be provided a Mercy meal card that can be used in the cafeterias at Mercy Main (Marketplace & Grille), West Lakes (Café), Medical Plaza Atrium Deli and Starbucks. This card will have $1200 dollars loaded in July and then again in January. If you run out of money before the cards are reloaded, you will not receive an early
reload and any meals purchased will be at your expense. If you lose your card, you should report it immediately to the GME Manager or Residency Coordinator.

**Hours of Operation**

- **Marketplace & Grille, Level A**
  - Daily, 6:15 a.m. – 7:00 p.m. and 1:00 – 4:00 a.m.
  - Hot food served daily from 6:15 – 9:30 a.m., 10:45 a.m. – 1:30 p.m., 4:45 – 7:00 p.m., and 1:00 – 4:00 a.m.
- **Atrium Deli, main level of Mercy Medical Plaza**
  - Open weekdays, 8:00 a.m. – 1:30 p.m.
- **West Lakes Café**
  - Weekdays: 4:00 – 9:30 a.m., 10:45 a.m. – 1:30 p.m., 4:45 – 7:00 p.m.
  - Weekends: 6:30 a.m. – 1:30 p.m.
- **Vending Services**
  - Outside the Marketplace & Grille
  - Near the Surgery Lounge
  - Next to the Emergency Department
  - East Tower, Level B
  - Outside Cath Lab (Mercy West Lakes)

**Lab Coats**
Residents receive four personalized lab coats at the beginning of their residency. It is the resident’s responsibility to keep these coats clean, pressed and in good condition. If replacement becomes necessary during the course of your residency, it will be at the resident’s expense. Please contact the appropriate Residency Coordinator with any questions.

Residents must adhere to Mercy’s Professional Appearance policy.

**Sleep Rooms**
At the hospital, sleep rooms and a lounge are available for your use while you are on-call. These rooms are located on A level at Mercy Main and at West Lakes on the 2nd floor (rooms #2671 & 2672). These rooms are for residents only and no visitors and/or family members are allowed in these areas at any time. All sleep rooms must be vacated each day by 8 a.m. The computers and phones in the call rooms are for business purposes only and will be monitored for compliance.

**Lockers**
Lockers are available for you to secure your personal belongings in the lounge area. You are strongly encouraged to secure any personal belongings. Each resident can obtain access from the Residency Coordinator (only Mercy-issued padlocks are allowed) and padlocks should be returned at the completion of your residency.
**Cell Phones/Pagers**
Each resident is responsible for providing a phone number they can be reached on at all times. It is your choice to provide a landline or cell phone number but you must be able to be reached. You will be able to claim your cell phone as a business expense on your taxes.

There are residency-provided cell phones and/or pagers for supervising and on-call residents. You are responsible for the transition of these phones to fellow residents, as well as the replacement cost if it is lost or stolen while in your possession. These phones are for Mercy Medical Center business only and **no personal calls should be made using these phones.**

**Mailboxes**
Mailboxes are located in the Medical Education & Research Department Resident Lounge for the Internal Medicine, Psychiatry & General Surgery Residents and Plastics Fellows. Family Medicine mailboxes are located at the Family Medicine Clinic. Each is labeled with your name. Please check your mailbox on a regular basis as items of importance are placed here. It is each resident’s responsibility to keep their mailbox cleaned out and orderly.

**Computer Access**
You will receive computer access and your personal login as part of the orientation process. Please do not share access codes or passwords with each other as you will be responsible for any activity completed under your sign-on.

Residents in Family Medicine will be issued laptops for documentation purposes. It will be your responsibility to bring the laptop to each of your clinic sessions. Internal Medicine Residents have shared laptops for Inpatient rotations and clinic sessions. You are responsible for the laptop in your possession. If your laptop is lost or damaged, you will be responsible for replacement costs.

**Email**
Most of the organizational and residency communication will be through your Mercy email account. It is your responsibility to make sure you check your Mercy email account on a regular basis as you will be responsible for the information that is shared via this method.

**Professional Liability**
As part of your residency, you are provided medical malpractice coverage through Catholic Health Initiatives, which is then indemnified by CHI’s wholly owned, captive insurance company, First Initiatives Insurance, Ltd. Should you receive a summons, suit, or claim, or become aware of a situation that could result in a claim, please promptly notify the Mercy Risk Management Department (515-643-2525), who will in turn notify the CHI Risk and Insurance Group. CHI will undertake an investigation and as necessary, retain defense counsel to represent you. Your assistance and cooperation in the defense or resolution of claims is very important, and this need may extend beyond the completion of your training when the claim is based on activity within the time frame of your residency. CHI will keep you informed of the
progress of their activities and the course of the claim. Insurance coverage includes cost of
defense as well as indemnity payments for all claims falling within the parameters of policy
language.

This professional liability insurance provides coverage for activities you are engaged in during
the course and scope of the residency program, and is not extended to a resident engaged in
professional activities that are not part of a Mercy program (e.g., service as summer camp
physician).

**CME Monies**
Each resident receives $800 per year for continuing education. The residency programs will
determine how to use these monies within their program and this will be shared with the residents.

**Professional Organization Memberships**
Membership in professional organizations is dictated by your specific residency program. Please
see the Residency Coordinator for specific information.

**Eligibility for Board Certification/Application for Practice Privileges**
Please see your Program Coordinator or Program Director for assistance in locating the
appropriate requirement information for your program.

Reminder that you must meet all program requirements regarding rotations and maximum
number of days absent. Please check your application criteria and deadline dates!

**Clinical Hours**
The Mercy Residency Programs oversee residents’ clinical hours and learning environment.
During all clinical rotations within the residency program, residents and staff shall conform to
existing ACGME, AOA, RRC, and institutional clinical hour policies. Clinical hours are defined as
activities related to the residency program, i.e., patient care (both inpatient and outpatient),
administrative duties related to patient care, the provision for transfer of patient care, time
spent in-house during call activities, and scheduled academic activities such as conferences.
Clinical hours do not include reading and preparation time spent away from the clinical site.

Each resident is responsible to log duty hours in MyEvaluations on a **weekly** basis. (see Duty
Hours policies, available on the Mercy GME website)

**Contingency Plan**
The Program Director and supervising faculty will monitor residents for the effects of sleep loss
and fatigue, and take appropriate action in instances where overwork or fatigue may be
detrimental to residents’ performance and the well-being of the residents, patients or both.
The Chief Resident(s) or designee will call the next resident on the rotating call list when it is recognized that another resident may be at their maximum hours or are showing signs of overwork or fatigue and another resident will be assigned to that particular resident’s duties for the remainder of the day. This schedule takes into account the rotations that other residents are on and the required time to be spent on that rotation. (See Fatigue Management policy available on the Mercy GME website)

**Prescription Regulations**
Before you start your Residency Program at Mercy, you will be issued a DEA number. You are authorized to write prescriptions using the Mercy Medical Center—Des Moines DEA number with a suffix assigned to you personally. You will keep this suffix until you obtain your permanent medical license and are required to obtain your own DEA number. Once you obtain your permanent Iowa license, you can no longer use Mercy’s DEA number. If you have any questions about prescription regulations or Pharmacy policies, please contact Mercy’s Pharmacy Department at 515-247-3280. Refer to Mercy Corporate Policies, Section 19, regarding pharmacy services.

Residents are responsible for all costs associated with obtaining individual DEA certificates at the start of residency.

**Medical Records/Legible Handwriting**
Timely completion of Medical Records in the Electronic Medical Record (EMR) is a priority for all residents. Timely completion is monitored bi-weekly and documentation of incomplete records are provided to the department. Residents will be notified of all non-compliant records and are expected to update the records within 1-3 days. Any records not updated after 2 weeks from notification will result on the resident being pulled from their service until all of the records are completed.

Legible handwriting is especially important in the practice of medicine. With the implementation of the EMR, this has become less of an issue. However, there will still be paperwork, orders, forms, etc... that will need to be completed so please make a conscious effort to write legibly with black or dark blue ink in all professional communications.

**Approved Abbreviations**
Make note of the unacceptable abbreviations list in Appendix B from Medical Records Documentation Policy #12.7.15.

**Time Off**
Residents are allowed twenty (20) working days of time off per year of residency (the time off year commences on the first day of the initial residency term. The time off year commences on the first day of each subsequent term). Time off is defined as absence from work due to personal business, illness or vacation.
Time off must be taken during the year of residency service for which the time off is granted. Time off not taken during the year automatically expires at the end of the residency year.

No two (2) time off periods may be concurrent (e.g., last month of the first (1st) year of residency and first month of the second (2nd) year of residency, in sequence. Each residency program may have specific program requirements. Check with your program director or program coordinator for specifics regarding your program’s PTO procedures, including how to request time off.

**Abuse & Neglect Reporting**
Per state regulations all applicable patient care givers are required to receive training in Child and Dependent Adult Abuse and Neglect every five years. This training will be provided during the first 3 months of your residency program. Please familiarize yourself with Policy #56.6.5 as to reporting protocols at Mercy.

In addition, Mercy’s philosophy that justice, mercy, and compassion are integral components in caring for the ill, Mercy has established a protocol for domestic abuse. Please familiarize yourself with Policy #56.8.4 regarding domestic abuse.
Hospital Information

Public Safety
The Department of Public Safety (Security) coordinates Mercy’s security and safety programs. Security has general responsibility within the medical center for the personal safety of patients and staff members and the protection of Mercy property. Security officers are on duty 24 hours a day and can be contacted by calling extension 7-3111 or outside the campus at 247-3111. **In an emergency, dial 911 or call the medical center operator (0).** Anyone who knows of, or is confronted with an incident involving anger, threats of violence involving medical center staff, patients or visitors is requested to contact Security immediately. In such instances, timeliness is important when contacting Security staff.

If you wish an escort to a parking ramp or parking lot at the medical center after hours or during hours of darkness, or if you have concerns for your personal safety in or around the medical center, please call Security for assistance. The Security Department provides 24-hour escort service to your vehicle upon request.

Your Mercy ID badge allows you to enter medical center buildings after normal closing times. Your card is encoded for access to the medical center buildings and the parking areas.

When you enter a building by using your card, please ensure the door is closed behind you. **Report the loss of an ID badge immediately to Security.** There is a replacement cost of $10.

You are advised not to store or leave personal valuables unattended in the medical center. While theft is relatively rare, occasional losses do occur. The medical center is open to the public for extended periods, so it is suggested you provide the same amount of security for your personal effects here as you would in any public institution. If you are the victim of a theft, please contact Security.

The Security Department maintains close liaison with local, state and federal law enforcement agencies in this area. If you have difficulties within the community that can be alleviated by dialogue with these authorities, please do not hesitate to contact the Security Department for assistance.

Security Tips
- Be aware of your surroundings – don’t get distracted by things like cell phones & texting.
- Walk with someone when possible, especially at night.
- Secure your belongings. Never leave valuables in plain sight in your vehicle. There are lockers available for your use in the Medical Education Department. Please see the Residency Coordinators to receive a locker and residency-issued padlock
- Always make sure your vehicle is locked.
- Before you enter your vehicle, check inside for intruders.
• Do not assume employee areas are secure.
• If you don’t need it, please do not bring it to work.
• If something does not look right, call and report it.
• If you have a personal safety concern, please let the Manager, Residency Coordinator or Program Director and / or Public Safety Dept. know about it (such as a legal protective order for your safety).

**Parking**
Residents may park on the top level of the west parking ramp, or any area designated for employee parking. After 3 p.m., they may park in the physician parking lot under the main entrance. All employees are required to display a parking decal if parking on Mercy property. The decals are issued by the Mercy Public Safety Office. Failure to display the proper parking decal will result in parking citations. Contact 247-3111 for additional information. See Appendix C for map.

**Telephones**
The Mercy telephone system was specifically developed for the telecommunication requirements of a large medical center, and provides many unique features. To make an outgoing call from anywhere in the Mercy system it is first necessary to dial “9” to connect the system to the city trunk lines. To dial a number internally (internal numbers start with 247- or 643-), use only the last 5 digits of the # (i.e. 643-3403 is dialed as 33403).

**Internet Use and Access**
There are issues related to the Internet regarding security, liability, resource consumption and personnel, making it critical to control our interaction with this environment. There are many benefits to using the internet for research and communications across the world. Mercy Medical Center has taken measures to permit internet access, in a controlled manner, minimizing as much as possible, the risks associated with connectivity to the internet. Users are expected to use Information Technology (IT) resources in pursuit of legitimate

**Pharmacy**
The *Mercy Medical Center Formulary* is available on each nursing unit. The Formulary lists all drugs approved by Mercy’s Pharmacy and Therapeutics Committee. Therapeutic information about these drugs is detailed in the *Drug Facts and Comparisons* text available on each unit.
Infection Control & Employee Health & Wellness

At Mercy Medical Center and Clinics, Standard Precautions are used for all patients at all times and are designed to reduce the risk of exposure to bloodborne pathogens.

Protect yourself from exposure to:

- blood
- all body fluids, secretions and excretions except sweat regardless of whether or not they contain visible blood
- non-intact skin mucous membrane

Protective equipment such as gloves, gowns, masks and face shields must be worn when exposure to any of these is likely. You should wash your hands between patient contact and after each time you change personal protective equipment.

All exposures to blood or body fluids, such as needle sticks, sharp injuries and/or splashes should be reported immediately to the Employee Health & Wellness Department (extension 7-3097). After hours, call the hospital operator for the House Supervisor on call.

Mercy has 3 categories of Transmission-Based Precautions. These categories are Contact, Droplet and Airborne, (additionally Special Contact Precautions may be ordered by the Infection Control Department for outbreak situations). Mercy has several negative air pressure rooms to utilize for Airborne Precautions. This includes rooms for all patient types including but not limited to, critical care, telemetry, pediatrics, and medical/surgical. Positive Air Purifying Respirators are used when entering an Airborne Precautions room.

Please Note:

- Quick Reference Guides are located in each patient care area. This guide contains information on Hand Hygiene, Isolation and Employee Health & Wellness issues.
- The Blood Borne Pathogen Exposure Control Plan and Tuberculosis Control Plan are available for reference on the Mercy Intranet.
- Contact Mercy’s Infection Control Department (extension 247-4457) for issues related to infection control.
- Please refer to the Infection Control Policy #29.21.5 on the Mercy Intranet.

Incident Reporting Information System (IRIS)

If you witness a patient incident, visitor/security incident or suffer an employee injury or exposure, you must report the incident through IRIS. IRIS can be accessed through the Mercy Net. The report will be used as part of the hospital’s QA/QI, risk management and peer review activities. Information provided through the incident reporting system is reviewed on an ongoing basis and allows for identification and documentation of problematic trends or circumstances.
**Medical Library**
The Levitt Medical Library is located on the A level next to the Medical Education Conference Room. Services provided by the library include literature searches, database training, obtainment of books and articles, notary, fax and scanning. If you have questions, please feel free to contact the library by email at library@mercydesmoines.org, phone (515) 247-4189 or in person.

**PubMed – Citation Search Database, includes Medline**
http://www.pubmed.gov

**Clinical Key – Full text books and journals available. Presentation maker**
http://www.clinicalkey.com

**EbscoHost – Citation Search Database and some full text articles**
http://search.ebscohost.com

**MedlinePlus – Easy to understand information for patients**
http://www.medlineplus.gov/

**Free Journals – Quick link to limited free journal articles**
http://www.freemedicaljournals.com/htm/english1.htm

**Up-to-Date**
http://www.uptodate.com/contents/search

**Library Catalog**
http://mercy.tlcdelivers.com

The Mercy residents have twenty-four (24) hour access to the library by using their employee ID badge. You may leave reading materials on the table or desk when finished. It is very important when entering the library that you record your visit on the sign in computer. Instructions for signing in are next to the computer.
Pastoral Care
The Pastoral Care Department at Mercy provides chaplains 24 hours a day for pastoral services to patients, and can be reached by phoning 515-247-3238. There are a number of denominations represented among the staff chaplains.

Care Coordination
We have social workers and patient care managers who assist patients and their families while collaborating with other members of the healthcare team to address multiple patient issues. Appropriate referrals include: discharge planning, referral to community supports and agencies, adjustment to illness support, referral to financial programs, transportation needs, as well as any concerns about the patient’s home environment. Early referral is essential to ensure timely response to patient needs and timely coordination of discharge planning needs.

Social workers and patient care coordinators are available to Mercy patients. Orders/Consultation requests can be made in the Electronic Medical Record, or by calling the Care Coordination Dept. office Monday – Friday from 8 A.M. – 4:00 P.M. Staff are available for after-hours and weekend assistance by calling the Mercy operator. Ask for the Care Coordination on-call staff member.

The Department maintains relationships with community agencies such as home health services, medical equipment providers, in-home support services, skilled nursing care facilities, alternate housing programs and behavioral health care (mental health/substance abuse) providers.

Corporate Compliance
Mercy provides a Corporate Responsibility/Privacy Officer to address any concerns that you may have. That telephone number is 515-643-4557.

Ombudsman
Mercy provides an ombudsman for your benefit who is available to speak confidentially with you about any concerns at 515-643-4557.
Policies

Residency Policies
Copies of all Residency Program policies are available on the Share drive under the Medical Education-General folder, as well as on the Mercy GME website.

- Academic Performance Remediation
- Grievance & Appeal
- Agreements
- CME Funds
- Duty Hours (ACGME & AOA)
- Evaluations
- Faculty Evaluations
- Fatigue Management
- Harassment
- Industry Interactions
- Medical Licensure, Narcotic Registration & other Certifications
- Moonlighting
- Procedure-Case Documentation
- Program Evaluations
- Prohibition of Restrictive Covenants in Trainee Agreements
- Record Retention & Release
- Research
- Selection of Residents
- Special Program Reviews
- Supervision
- Time Off
- Transition of Care
- Travel Expenses

Corporate Policies
Policies in the Employee Handbook are available on Inside CHI Connect under the HR/Payroll link, My Handbook tab. All other corporate policies are accessible on the MercyNet under Human Resources tab.

The following corporate policies have significant importance to the Residency Programs and should be reviewed by the residents.

- 11.2.7 Medical Students
- 11.4.2 Preceptee Residents (Non-Mercy) Agreements
- 11.21.3 Residency Closure
- 11.26.2 Medical Education Teaching Expectations
The Medical Staff of Mercy Medical Center—Des Moines has adopted a Code of Professional Conduct, which we have also extended to the Mercy Residents. This code promotes the organizational culture required to meet the Mission and Core Values of Mercy Medical Center—Des Moines, Mercy Health Network in Iowa and Catholic Health Initiatives.

Resident physicians need to be aware of these following expectations. Professional conduct promotes effective communication for quality patient care, reduces liability and exposure for the individual physician, as well as the organization. As a resident physician, you are representing Mercy Medical Center at all times, not just on work time and therefore, disruptive or inappropriate behavior during these time, if reported back in the workplace, are therefore disruptive and will be addressed.

1) Resident physicians shall treat all individuals with respect, courtesy and dignity.
2) Resident physicians shall maintain and protect the confidentiality of patient health information, peer review proceedings and/or Medical Staff or organizational information.
3) Resident physicians will be expected to utilize the appropriate mechanisms to address quality of care concerns and/or professional competence, organizational issues, promote conflict resolution for professional disagreements.
4) Resident physicians shall avoid conflicts of interest, or communicate these to the appropriate individuals.
5) Resident physicians must be aware that the Medical Staff has developed a policy regarding Unprofessional Conduct/Disruptive Behavior. Behaviors that may be viewed as disruptive to the delivery of safe, effective patient care will be addressed by Mercy Leadership and Administration representatives. A non-exclusive list of examples considered disruptive conduct include:
   A. Abusive behavior, verbal, non-verbal actions, use of profanity, vulgarity, violent, intimidating or threatening language or behavior.
   B. Threats of physical violence, assault/battery throwing objects, inappropriate touching or gestures.
   C. Harassment, unwelcome conduct, whether verbal or non-verbal, physical actions based on a person’s status, sex, age, color, race, ancestry, national origin, disability or job status. This includes retaliation against others who report disruptive behavior, or sexual harassment.
   D. Behaviors that create a hostile work environment and interfere with the work of the health care team.
E. Disparaging comments about colleagues, verbal and/or documented in the medical record.
F. Repeated failure to respond to calls regarding patient care.

6) Resident physicians are to recognize that reports of unprofessional conduct require intervention by Mercy Leadership. Unresolved issues may be addressed under the Physician Health Policy, Medical Staff Bylaws, Article V. Investigation/Remedial Actions, and will be reported to the respective licensing board (Iowa Code 147.135) as required. The Iowa Board of Medical Examiners views unprofessional conduct as directly related to professional competence.

Please review corporate policy 13.27 Process for Addressing Reports of Unprofessional Conduct/Disruptive Behavior of Medical Staff Members/Allied Health Practitioners.

Core Competencies

Since 2003, the Accreditation Council of Graduate Medical Education (ACGME) began to require all medical residency training programs to define specific knowledge and skills required and provide the educational experiences needed for their residents to demonstrate achievement of six defined competencies. The American Osteopathic Association (AOA) has since integrated their Osteopathic Principles & Practices competency into the other six core competencies utilized by the ACGME. These six general competencies are:

Patient Care that is compassionate, appropriate, and effective for the treatment of health problems and the promotion of health
Medical Knowledge about established and evolving biomedical, clinical and cognate (e.g. epidemiological and social-behavioral) sciences and the application of this knowledge to patient care
Practice-Based Learning and Improvement that involves investigation and evaluation of their own patient care, appraisal and assimilation of scientific evidence, and improvements in patient care
Interpersonal and Communication Skills that result in effective information exchange and teaming with patients, their families and other health professionals.
Professionalism, as manifested through a commitment to carrying out professional responsibilities, adherence to ethical principles and sensitivity to a disease patient population
Systems-Based Practice, as manifested by actions that demonstrate an awareness of and responsiveness to the larger context and system of health care and the ability to effectively call on system resources to provide care that is of optimal value.
Institutional Core Competency Plan (approved by the Graduate Medical Education Committee)

All of the residency programs have transitioned to the ACGME milestones competency. Competencies will be specific to each residency program.

Criteria for Promotion

Criteria for promotion can be found in the Supervision policy on the share drive – Medical Education – General folder.
## Appendix A

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<thead>
<tr>
<th>Beginning Pay Period Date</th>
<th>Ending Pay Period Date</th>
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<tr>
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## Appendix B

**Documentation in the Medical Record**  
**Prohibited Abbreviations**  
**The Joint Commission (TJC) Official Do Not Use Listing**

<table>
<thead>
<tr>
<th>Do Not Use</th>
<th>Potential Problem</th>
<th>Use Instead</th>
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<tbody>
<tr>
<td>U (unit)</td>
<td>Mistaken for “O” (zero), the Number “4” or “cc”</td>
<td>Write “unit”</td>
</tr>
<tr>
<td>IU (International Unit)</td>
<td>Mistaken for IV (intravenous) or the number 10</td>
<td>Write “International Unit”</td>
</tr>
<tr>
<td>Q.D., QD, q.d., qd (daily)</td>
<td>Mistaken for each other</td>
<td>Write “daily”</td>
</tr>
<tr>
<td>Q.O.D., QOD, q.o.d., qod (every other day)</td>
<td>Period after the Q mistaken for “I” and the “O” mistaken for “I”</td>
<td>Write “every other day”</td>
</tr>
<tr>
<td>Trailing zero (X.0. mg)</td>
<td>Decimal point is missed</td>
<td>Write X mg</td>
</tr>
<tr>
<td>Lack of leading zero (.X mg)</td>
<td></td>
<td>Write 0.x mg</td>
</tr>
<tr>
<td>MS</td>
<td>Can mean morphine sulphate or magnesium sulfate</td>
<td>Write “morphine sulfate”</td>
</tr>
<tr>
<td>MSO₄ and MgSO₄</td>
<td>Confused for one another</td>
<td>Write “magnesium sulfate”</td>
</tr>
</tbody>
</table>
Appendix C

Mercy Medical Center
Central Campus – Parking

[Map of Mercy Medical Center Central Campus with labels for Emergency Entrance (E), Patient and Visitor Parking (P), Valet Parking (V).]