

# **INTERNSHIP IN VETERINARY MEDICAL ONCOLOGY**

**Louisiana State University  
School of Veterinary Medicine  
Department of Veterinary Clinical Sciences  
Veterinary Teaching Hospital**

**Revised September 2016**

## **TABLE OF CONTENTS**

- 1.0** Introduction
- 2.0** Objectives
- 3.0** Prerequisites
- 4.0** Faculty Mentor
- 5.0** Clinical Program
- 6.0** House Officer Rounds and Seminar Program
- 7.0** Teaching Program
- 8.0** House Officer Committee
- 9.0** Employment and Benefits
- 10.0** Performance Evaluation
- 11.0** Post Internship Study
- 12.0** Application Procedure
- 13.0** Appendices
  - 13.1** House Officer Rounds Evaluation Form
  - 13.2** VCS Seminar Evaluation Form
  - 13.3** House Officer Leave Request
  - 13.4** House Officer Block Evaluation Form
  - 13.5** Block & Quarterly Performance Evaluation
  - 13.6** Expectations of Oncology House Officers

**INTERNSHIP PROGRAM  
IN  
VETERINARY MEDICAL ONCOLOGY**

**Louisiana State University  
School of Veterinary Medicine  
Department of Veterinary Clinical Sciences  
Veterinary Teaching Hospital**

**1.0 INTRODUCTION**

**1.1** The Internship in Medical Oncology at the School of Veterinary Medicine (SVM) at Louisiana State University is designed to provide 1 year of post internship training in the discipline of Medical Oncology. The clinical facilities of the Veterinary Teaching Hospital (VTH) will be the primary training site for this program. The training program will use Faculty from the Companion Animal Medicine Services, the Radiation Oncology Service and the Medical Oncology Service in the Department of Veterinary Clinical Sciences as mentors.

**2.0 OBJECTIVES**

- 2.1** To provide the opportunity to experience advanced training in Medical Oncology.
- 2.2** To prepare the Intern for residency training or entry into a high quality small animal practice.
- 2.3** To provide experience in the review and evaluation of the scientific literature pertaining to the discipline of Medical Oncology through participation in the Department's journal club.
- 2.4** To provide experience in the preparation of scientific articles for publication through participation in the House Officer rounds and seminar series and through faculty mentorship.
- 2.5** To provide training and experience in clinical teaching.

**3.0 PREREQUISITES**

- 3.1** Candidates must have a DVM or equivalent degree.
- 3.2** Candidates must have completed a rotating internship in medicine and surgery.
- 3.3** Candidates must have United States permanent resident status

## 4.0 FACULTY MENTOR

- 4.1 The intern will be assigned a faculty mentor who is a member of the Medical Oncology Department. This mentor will monitor the intern's progress through the program and also the intern's progress of case and seminar presentations to ensure timely and acceptable preparation. The mentor may suggest the intern seek other guidance from faculty more closely associated with the cases or topics. Manuscripts submitted for publication will be reviewed, revised and coauthored by a SVM faculty member(s).

## 5.0 CLINICAL PROGRAM

- 5.1 **Introduction** The major thrust of the internship program is to provide advanced training in the field of medical oncology under direct supervision from the faculty mentor and the other members of the Companion Animal Medicine and Radiation Oncology Departments. The intern's independent case responsibility will increase commensurate with their experience and competency.
- 5.2 **Expectations:** Please refer to the additional document – expectations for oncology house officers, for a list of our expectations of you and what your expectations should be of us.
- 5.3 **Clinical Training**
- 5.3.1 In the 50 week program there will be a total of 48 weeks of clinic duty split between the medical and radiation oncology and support services with the primary duty serving the medical oncology service. The intern will be trained in all pertinent aspects of the delivery of oncology practices to companion animal patients. The training will include, but not be limited to, patient assessment & diagnosis of neoplastic disease process, current recommendations and standard of care treatment for oncological diseases, and management of emergency cases. All of the intern's work will be under the supervision of a faculty member within the department. Initially it is anticipated that direct faculty supervision will be significant. It is anticipated that as the program progresses that direct supervision will decrease commensurate with the development of the intern's clinical skills.
- 5.3.2 The intern will have the opportunity to rotate through a half block in the following disciplines if available: Diagnostic Imaging, Small Animal Medicine, Clinical Pathology.
- 5.3.3 The intern will participate in clinical instruction and tutorials for students.

**5.3.4** The intern has 10 vacation days that can be used for interviews and conferences. All holiday leave and additional conference/course leave is granted at the discretion of the oncology faculty.

**5.4 Emergency Duty.** The Intern will participate in the emergency duty as assigned.

**5.4.1** The intern will participate in emergency duty scheduled with other members of the medical oncology service. This duty will commit the intern to evening, weekend and holiday duty on a rotating schedule. Early in the intern's program, faculty supervision during emergency duty will be significant. A member of the oncology faculty will always be available for backup when the intern is on emergency duty.

## **6.0 HOUSE OFFICER ROUNDS AND SEMINAR PROGRAM**

**6.1** The House Officer Rounds are designed to provide the intern an opportunity to receive and present interesting, unusual, or difficult clinical case material utilizing a problem oriented approach to professional colleagues and to develop manuscripts for publication. The intern will participate with other VCS house officers on a rotating basis and will make at least 1 case presentation in House Officer Rounds during the year.

**6.2** The House Officer Seminar series is designed to provide the intern with the opportunity to research and present scientific material to professional colleagues. One seminar will be presented during the year.

**6.3** A SVM faculty member will be selected by the intern to mentor both case presentations and seminar preparation. Any manuscript submitted for publication will be reviewed, revised and coauthored by a SVM faculty member(s).

**6.4** Attendance: The intern is required to attend and participate in the following: VMED 7210: VCS Seminar, House Officer Rounds and, other seminars which are requirements of the intern's home section.

### **6.4.1 VCS HO Rounds/Seminar Policy**

**6.4.1.1** Attendance at all HO Rounds/Seminar sessions is required.

**6.4.1.2** Attendance will be taken at the beginning of each session.

**6.4.1.3** The intern will be required to present an additional seminar if they have more than one unexcused absence during the program year.

**6.4.1.4** All absences must be accounted for by completing a HO Leave Request Form and submitting it to the HOC chair prior to your absence.

**6.4.1.5** Excused absences include the following: illness, annual leave, attendance or participation in a continuing education program, presentation of a student lecture, scheduled out-rotation or special service requirements per request of advisor. All other absences are unexcused unless deemed excusable by the HO advisor.

**6.5** Evaluations of House Officer Rounds and House Officer Seminar presentations will be provided by those in attendance. (Appendices)

## **7.0 TEACHING PROGRAM**

**7.1** Throughout the Internship program, the intern will function as a role model for students in the DVM program. The intern will participate in the clinical instruction and evaluation of Phase II veterinary students assigned to the service

## **8.0 HOUSE OFFICER COMMITTEE**

**8.1** The Committee is comprised of a representative of each House Officer program. It is responsible for the year-end review of each house officer's progress. This review is based on block evaluations received throughout the course of the program. The Committee grants a certificate to those who successfully complete the program.

**8.2** All House Officers are required to complete an annual evaluation of their program with suggestions for improvement before continuation or completion of their program is granted.

## **9.0 EMPLOYMENT AND BENEFITS**

**9.1** Louisiana State University classifies interns and residents as University employees. As such, they (and their eligible dependents) qualify for the Louisiana State University Baton Rouge health insurance and benefits. The School of Veterinary Medicine provides malpractice insurance coverage. The salary (not a stipend) is published in the Directory of Internships and Residencies as published by the American Association of Veterinary Clinicians ([www.virmp.org](http://www.virmp.org)). Salary is payable in monthly increments via direct deposit. Retirement contributions are required and withheld from each paycheck. No social security tax is withheld. Federal and state income tax is withheld. The employee may be eligible to petition the IRS for exemption from federal tax on part of his/her salary.

**9.2** The Veterinary Teaching Hospital operates year round. House officers will share emergency duty with other house officers within their specialty.

House Officers will also share evening, weekend and holiday duty on a scheduled basis.

- 9.3** The University offers accrual of annual time off following either the University accrual rate (14 hours/month with a maximum accumulation of 176 hours) or the Civil Service Schedule rate (8 hours/month with no maximum accumulation). Sick time off accrual is 8 hours/month. All time off, except for illness and emergencies, should be requested and approved 30 days in advance. Time off requests must be entered into Workday (via the employee's MyLSU account) by the employee and approved by the supervisor before time off will be granted. Annual time off will be granted on an individual basis taking into account the reason for the requested absence and the needs of the service and hospital. Annual time off for personal business is to be taken during elective or research blocks. Emergency absence such as for illness or a death in the immediate family should be brought to the attention of the clinician to whom the House Officer is assigned as soon as the House Officer learns that he/she will be absent. The official request should be entered into Workday upon the House Officer's return. Except in unusual circumstances, approval will not be granted for time off during the final month of the program.

## **10.0 PERFORMANCE EVALUATION**

- 10.1** House Officers receive a Block Performance Evaluation at the end of each rotation to document his/her performance during the program. Every two weeks the house officer will assign a faculty member to evaluate them for the previous rotation using E\*Value software.
- 10.2** The Intern is to meet with his/her Advisor at the beginning of each block to report accomplishments and plans.
- 10.3** The House Officer Committee reviews block evaluations and has the capability to recommend continuation, probation or termination of the house officer's program at any time based on these evaluations.
- 10.4** The House Officer Committee meets in May of each year to determine if the house officer has successfully completed his/her program. This determination will be based on all evaluations received for the house officer.
- 10.5** All House Officers are required to complete an annual evaluation of their program with suggestions for improvement before continuation or completion of their program is granted.

## **11.0 POST INTERNSHIP STUDY**

- 11.1** If the intern is considering a residency or graduate program following completion of the internship, it is suggested that he/she consult with

relevant faculty to maximize preparation for that program.

## **12.0 APPLICATION PROCEDURE**

Candidates may apply for the Internship in Medical Oncology by submitting:

- 1) A standard application through [www.VIRMP.org](http://www.VIRMP.org)
- 2) A statement of Internship objectives and career goals
- 3) Official academic transcripts
- 4) A minimum of three letters of reference from individuals currently familiar with the applicant's professional status



## 13.0 APPENDICES

### 13.1 VCS HOUSE OFFICER ROUNDS EVALUATION FORM

House Officer: \_\_\_\_\_ Date: \_\_\_\_\_

Evaluator: \_\_\_\_\_

	<b><u>Evaluation</u></b> E=Excellent G=Good N=Needs Improvement	<b><u>Comments</u></b>
<b>Case Selection</b>		
Complexity of case		
Appropriate follow-up		
<b>Content</b>		
Format of presentation		
Discussion		
Conclusions		
Use of problem-oriented approach		
<b>Delivery</b>		
Clarity of speech		
Rate of delivery		
<b>Effectiveness of Visual Presentation</b>		
Use of visual aids		
Body language and enthusiasm		
Questions handled appropriately		

**Additional Comments:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### 13.2 VCS SEMINAR EVALUATION FORM

Presenter: \_\_\_\_\_ Date: \_\_\_\_\_

Audience: \_\_\_\_\_

Title/Topic: \_\_\_\_\_

**Evaluation Criteria:**

	Points	Evaluation
Definition of subject: introduction, importance, clinical significance	0-5	
Organization	0-10	
Quality of material	0-10	
<b>Presence: speaking ability</b>		
Clarity	0-10	
Rate of delivery	0-10	
Enthusiasm, expressiveness	0-10	
<b>Support Materials</b>		
Handouts, manuscript	0-15	
Visual aids	0-5	
Appropriate Summary	0-5	
Presentation consistent with audience level	0-10	
Questions/discussion handled appropriately	0-10	
	<b>Total</b>	

**Comments:**

---



---



---



---

Evaluator: \_\_\_\_\_



### 13.4 HOUSE OFFICER BLOCK EVALUATION FORM

<u>House Officer Evaluation Form in E-Value</u>	Needs Improvement	Satisfactory	Good	Excellent	Not Applicable
<b>Professional Ability</b>					
Theoretical Knowledge					
Knowledge Application					
Skills					
Patient Care					
Thoroughness					
<b>Individual Characteristics</b>					
Communication with clinicians					
Communication with students					
Communication with staff					
Independent study & initiative					
Awareness of current literature					
Contribution to student education					
Performance under stress					
Ability to accept criticism					
Organizational skills					
Ability to work in a team					
Reliability					
Motivation					
Attendance at seminars & rounds					
Presentation at seminars & rounds					
Ability to make independent decisions					
<b>Hospital Service</b>					
Completion of duties					
Quality of work					
Emergency services duty					
Communication with veterinarians					
Client communication					
Referral letters & record keeping					
Acceptance of service & case responsibility					
Adherence to VTH protocol					
<b>Strengths:</b>					
<b>Areas for Improvement:</b>					

## 13.5 BLOCK & QUARTERLY PERFORMANCE EVALUATION

Resident:  
Evaluation period:  
Supervisor / Evaluator:

Quarter: 1 2 3 4  
Evaluation date:

Performance rating scale (extent to which resident meets program requirements)

5 = well above; 4 = above; 3 = meets; 2 = below, 1 = well below, 0 = not acceptable; NO = not observed

A marginal score (2) in any major category (Numbers 1 through 5) on two consecutive evaluations or an unsatisfactory score (1 or 0) in any category will automatically trigger probation for the resident.

### 1. **Clinical abilities**

- Demonstrates appropriate technical skills*
- Conducts technical procedures competently*
- Quality of clinical diagnosis and test interpretation in relation to stage of training*
- Able to build a prioritized differential diagnosis based on clinical and imaging findings*
- Able to advise on appropriate treatment plan in relation to patient condition*
- Manages case flow in an efficient manner*
- Interacts with residents/faculty in other clinical specialties effectively*
- Able to handle emergencies*

### 2. **Knowledge**

- Demonstrates understanding of basic science relevant to oncology and clinical medicine.*
- Familiarity with and understanding of relevant veterinary and human oncology literature.*
- Demonstrates growth in knowledge base*
- Demonstrates ability to critically evaluate quality of newly reported information in the literature*

### 3. **Interpersonal skills and Professional conduct**

- Communicates effectively with faculty, residents, students, staff and Referring Veterinarians*
- Demonstrates enthusiasm and willingness to work*
- Demonstrates judgment, maturity, and professionalism*
- Accepts responsibility*
- Accepts professional criticism*
- Supports a "team-effort"*
- Arrives on time*
- Participates and leads in rounds*

### 4. **Teaching Ability**

- Demonstrates both an ability and an interest in teaching during clinics and student rounds*
- Shares knowledge with other residents and faculty*

### 5. **Research and other academic pursuits**

- Maintains appropriate progress on research and other writing projects*
- Attends pertinent hospital conferences and required courses*
- Attends national and international oncology/medicine meetings*

Specific areas where improvement is needed:

Areas of positive performance and recognition:

Action Plan:

Supervisor's signature: \_\_\_\_\_

Resident signature : \_\_\_\_\_

## 13.6 EXPECTATIONS OF ONCOLOGY HOUSE OFFICERS

Our goal is provide you with excellent training in medical oncology. Obviously your level of supervision and the expectations that we have for you will vary dependent upon your position in the program and the specific needs that you have. However, we do have some expectations of our medical oncology house officers that are required from all of you. This is not an exhaustive list and we hope that you exceed these. In return, you should expect us to provide you with excellent teaching experiences in a supportive environment and an opportunity to develop and improve your own teaching and research skills. Please feel free to discuss this with any members of the oncology faculty.

You should receive evaluations every block change. Your primary mentor should also meet with you every 3-6 months to discuss your progress. You will asked to fill out a quarterly evaluation on your progress (self-assessment) and bring that to the meeting with you. This allows you to evaluate critically evaluate where you are and where you would like to be. During the meeting, we will discuss how we can get you there.

General Expectations:

1. Case Management:
  - a. Every case on our service that is in hospital should have a physical examination performed by you and a plan for the day in place PRIOR to rounds at 8am. As rounds will start promptly at 8am, this means that all ICU or in hospital patients should ideally be taken care of by 7:45am.
  - b. If there are emergency transfers, these cases also need to be examined by you and have a plan in place PRIOR to rounds at 8am. In order to accomplish this, if you are the resident on back up for that week, you are required to be here every day at 7:30am even if you are unaware of any oncology transfers. You are responsible for checking the transfer board at 7:30am to ensure that there are no cases to be transferred to us that morning and none of our current patients came in overnight. This also means that on the mornings of journal club, you should check the board prior to journal club so we can get you house officer rounds on time.
  - c. If you have inpatients, you need to be in town and available to check on them if there are any problems during the night. If you have critical inpatients it is unacceptable to not be available for them or be under the influence of anything that would prohibit you from making the most appropriate choices.
  - d. If anyone has a serious concern about one of your patients after hours – it is your responsibility to come into the hospital and assess them yourself. If you are unsure about what is going on with the patient – it is your responsibility to contact the supervising faculty member for additional advice.
  - e. Every weekend that you are on clinics you are expected to be at the clinic by 8am to perform a physical examination on all your inpatients, round with the students and perform any procedures that are necessary. The only exception to this would be if you have no inpatients on service. You also need to contact your supervising faculty member to review any case in the hospital by 10am at the latest.
  - f. Every in-patient that is discharged needs to have talked to a clinician. On weekends, we prefer to discharge between 8-10am. If you cannot be here during that time and the student has agreed to discharge the patient, you MUST speak with the owner that day prior to them being discharged to answer any questions or concerns. You must also be available by phone at the time of discharge if there are any issues that arise during discharge. All

paperwork should be signed prior to the discharge and the bill checked for accuracy.

## 2. Communication

- a. Students should update the client daily for any hospital inpatients. Critical patients should have their owners contacted a minimum of twice a day and at least once a day by the clinician. Clients should be immediately updated by a veterinarian if the status of a patient changes. If there is a change in the estimate, this should be communicated to the client by the veterinarian in charge of the case and NOT the student.
- b. ALL client communications should be appropriately documented and immediately placed in the medical record or in the to be filed slot in oncology. This is critical to allow appropriate case management. If you know that a case is coming back in, before the communication will likely be filed and you discussed a change in the plan for a patient, then you should make a copy of the communication and leave it posted on the bulletin board in oncology. Additionally, let the supervising clinician know that a change of plans has been made and where the documentation is located. If you email any clients, all email communications must be documented as the legal part of the medical record.
- c. Referring veterinarians need to be called on the day of admission and on the day of discharge. If this is the same day, they only need to be contacted once. Additional calls to the referring veterinarian are required if there is a major change to the case management or if other major developments occur.
- d. Communication with clinicians, staff, and students in the hospital is expected to be professional and courteous at all times. If you are having a problem with a particular person, please let your mentor know ASAP so any issues can be addressed.
- e. ALL new patient discharges should be checked by the clinician and signed prior to patient discharge. Appropriate at home medications and dosages should be double checked for accuracy. You should clarify prior to each discharge that a patient is still receiving all listed medications. Double check for typographical errors as these frequently happen. Emailing discharges is only appropriate for particular situations.
- f. If you are emailing discharges to a client this needs to be done within 24 hours. We prefer that emailing of discharges only be performed if absolutely necessary. If you email a discharge, you MUST be sure that a signed copy goes into the patient's medical record and is faxed to the primary veterinarian.

## 3. Emergency Duty

- a. You must be in town and available by phone at all times. You must answer all pages promptly and in a courteous manner. If you are going somewhere where you do not get cell phone service, then you must call the on duty clinician in the ICU and leave a number or make contact arrangements how and where they can reach you if there are problems. It is unacceptable to not be available if you are the doctor on call.
- b. If an intern calls you about a potential oncology case that is in their judgment not stable, you should go in and examine the case yourself at that time. If the attending intern considers the animal stable, you may guide them over the phone. When in doubt – GO IN! It is much easier to fix a problem then versus 8 hours later.

- c. If an existing oncology patient presents to the emergency service for something likely related to its oncological problem, it is your responsibility to go in and evaluate the patient, especially if they are critical. If they are stable, you may guide the intern over the phone. The interns are well aware that they should always contact you for any existing oncology cases. If you have any questions, contact the faculty member who is your back up.
- d. If you administer chemo to any patient on an emergency basis, you are responsible for making sure that the appropriate signage is placed on the patient's case and the appropriate bags are available. You should inform the head ICU nurse and intern of the chemotherapy administration. The more people who know – the less likely the chance for accidental human exposure. If you are asked to administer chemo to a patient not on our service and you are uncomfortable, contact your supervising oncology faculty member.
- e. We expect you to provide supportive mentorship to the general, rotating interns on the emergency service. We expect you to always offer to come in and see the case with them if they need help. If you are ever unsure of what the best course of action is – contact the faculty on back up.
- f. On weekends and holidays, you should check with the emergency intern whether there are any potential oncology cases in the hospital. If so, these should be reviewed by you to ensure that they are being managed appropriately.

#### 4. Rounds/Teaching

- a. We expect you to be present at and actively participate in all medical oncology and house officer rounds. You are excused from these rounds if you have urgent needs in the hospital, you are on your vacation time, or studying for your board examination (exception house officer rounds as declared by the HO Committee).
  - i. Fridays – 7-7:45am – oncology journal club
  - ii. Fridays – 8:00-9:00am – house officer rounds
  - iii. Tuesdays – 8:00-9:00am – boards prep rounds (1<sup>st</sup> and 2<sup>nd</sup> years only)
  - iv. Wednesdays – 1:00-2:00pm – cytology rounds
  - v. Mondays – 12:30-1:30pm – medicine journal club
  - vi. Mondays – 11:30-12:30 big block change only (oncology section meeting every other block)
- b. If we are reading through a particular book, you will be expected to participate in this as well.
- c. We expect you to take an active role in presenting rounds to the students at least once per week (every Wednesday) and more if the service is quiet. You should feel comfortable discussing important aspects of the topic with the students. Rounds should last approximately 45-60 minutes. New house officers are required to attend all student rounds topics given by both faculty and other house officers for the first several months. You will not be asked to lead rounds until you are two months into your residency. Your mentor will discuss with you a topic that you feel comfortable leading rounds on at that time.
- d. You are required to participate in the student rounds in which they present their papers (Second Thursday of the rotation). This is part of both their grade and their outcomes assessment, so you need to be there to give a proper evaluation.



- e. Teaching students is critical. Take the time to review each case with the student and engage them. This can be difficult when it gets busy, but it is our job to ensure that they have the opportunity to learn from each case.
- f. Be realistic of what to expect from the students. If by the end of week one, you feel that a student is not performing adequately, you are responsible for communicating this to the supervising faculty member as well as filling out their e-value evaluations.
- g. You will be asked to give one lecture in the 2<sup>nd</sup> year oncology course. This can be on a topic of your choosing and should be discussed with your mentor.

#### 5. Oncology Service

- a. The goal of the internship is to train you to be the best board certified oncologist that you can be and prepare you a residency program. This includes being a well- rounded doctor. You will primarily be on the oncology service
- b. Each house officer will have two weeks of scheduled paid vacation each year. During this time it is expected that you will not be in the hospital and you will not be required to be available. Enjoy your time off! If you have additional vacation days that must be used through the hospital, please feel free to use these days as you would like. If possible, let your service clinician know as soon as possible of your absence so the schedule can be changed if necessary.
- c. Board rounds begin Monday-Thursday promptly at 8am and at 7:45 (after journal club) on Friday. Everything should be completed prior to this time. If you are late in getting there, the day gets backed up.
- d. This is a service and as such we must all work together in order to get through the day and all of the cases. If you are not busy and a technician needs help, please do so. This may mean holding for chemo, helping sedate a patient or even taking a patient in at the front. When you are on other services in the hospital, you are not expected nor should you see cases that present to the oncology service. Your primary responsibility is to the service that you are currently on.
- e. All cases coming back in should be on put on the schedule. Please make sure at the end of the day that all of your patients are appropriately scheduled with the nurses. This will help the nurses as well as the front desk.
- f. All grades and outcomes assessments must be done on time. It is unacceptable to have lingering paperwork. All grades and outcomes assessments for a half block should be done by the Monday morning after the half block is over.
- g. Hospital dress code must be followed at all times. If you are on clinic duty, you must be dressed appropriately to see clients. No jeans or open toed/peep toed shoes are allowed per hospital guidelines. When you are off duty, no dress requirements exist.

#### 6. Travel

- a. Attendance at a conference is a privilege and at the discretion of the faculty members. There are funds available through the hospital that is available to offset the cost of travel to a conference. Preference is given to house officers who are presenting at a conference.

#### 7. Consults

- a. Consultation with referring veterinarians should be completed within 24 hours of the initiating consultation.
- b. If you are ever unsure about a case during a consult, please notify the faculty clinician for advice.
- c. House officers will not be allowed to take phone consultations within the first 6 months of their program and only at the discretion of the supervising faculty after that time.
- d. Interns can take in-house consultation at any time, but should be done concurrently with a faculty member or senior house officer in the first 6 months. If there is any uncertainty about a case, the supervising faculty member should be consulted.