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# APPENDIX

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Welcome to Vanderbilt University Medical Center! We are excited that you have joined our Surgical Critical Care/Acute Care Surgery Fellowship Program. This handbook contains the nuts and bolts of the program as it pertains to information you will need to know as a fellow. We hope you enjoy your training with us. If you have any suggestions as to things that could be added to this handbook for future trainees, please let us know.

**Introductory Information**

### Your Program Team

<table>
<thead>
<tr>
<th>Name</th>
<th>Position</th>
<th>Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raeanna Adams, MD, MBA</td>
<td>Program Director</td>
<td><a href="mailto:raeanna.c.adams@vumc.org">raeanna.c.adams@vumc.org</a></td>
</tr>
<tr>
<td>Stephen Gondek, MD, MPH</td>
<td>Associate Program Director – SCC year</td>
<td><a href="mailto:Stephen.p.gondek@vumc.org">Stephen.p.gondek@vumc.org</a></td>
</tr>
<tr>
<td>Oliver Gunter, MD, MPH</td>
<td>Associate Program Director – Instructor year</td>
<td><a href="mailto:oliver.l.gunter@vumc.org">oliver.l.gunter@vumc.org</a></td>
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<tr>
<td>Andria Keating</td>
<td>Associate Program Manager</td>
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</tr>
</tbody>
</table>
First Year Fellow Expectations

The first year is designed to provide education in Surgical Critical Care and to expand skills in research, administration, and education. During this year, the framework for the development of specialized skill sets for each fellow is to be accomplished.

Clinical Expectations:

Primary “daytime” responsibilities: direct the care of patients within the unit to which you are assigned for the month.

Primary “nighttime” responsibilities: 1st to the surgical ICUs (Surgical, Trauma, Burn) and the care of critically ill patients within the surgical units and 2nd to the resuscitation and operative management of acutely injured patients.

- If the fellow is not available for management of unstable patient due to patient care conflicts, notify the attending.

Fellows are expected to:

- Supervise the patient care delivery for those patients in the ICU to which you are assigned for the month to the attending of the week’s satisfaction.

- Remain in compliance with ACGME Duty Hour Guidelines and record them in New Innovations.

- Be present/available within the unit to which you are assigned beginning at the time specified by the Medical Director of that service and remain in the unit to the degree required to enable your direction of the resuscitation and management of critically ill or injured patients.

- Participate in the daily ICU rounding process and in collaboration with faculty, direct ICU rounds.

- Direct the management of critically ill patients within each of the ICUs while on call at night.

- Maintain a current and accurate case log via the ACGME Critical Care Case Log system, which is required for surgical critical care board eligibility. Will also use the ACGME Log System for the AAST case requirements, after approved (anticipated ~September 2020). Until that time, must track operative and procedural cases to enter into the ACGME log when able. Required AAST case numbers can be found on the AAST website. [https://www.aast.org/acute-care-surgery/current-acsc-fellows/curriculum-and-case-numbers](https://www.aast.org/acute-care-surgery/current-acsc-fellows/curriculum-and-case-numbers)

- Attain the skills and judgement to supervise invasive procedures according to institutional and service-specific performance standards and guidelines including:

1. Central lines, arterial lines, PA catheters
2. Bronchoscopy and bronchoalveolar lavage
3. Percutaneous tracheostomies
4. Chest tube placement
5. Airway management
6. Bedside laparotomy

**Educational Expectations:**

- Attend conferences specific to the unit/service to which you are assigned for the month.
- Attend Fellows’ Conference (excused from clinical duties unless life-threatening emergency).
- Attend Division Faculty and Research Meetings
- Attend simulation labs
- Demonstrate knowledge and application of critical care topics/principles to the satisfaction of critical care faculty.
- Take the MCCKAP critical care in-service exam
- Self-Directed Learning via an aggressive reading program

**Suggested Surgical Critical Care Texts:**

- *The ICU Book* – Paul Marino, Kenneth M. Sutin
- *Critical Care* – Joseph M. Civetta, Robert W. Taylor, Robert R. Kirby
- *Surgical Critical Care* – Joseph A. Moylan
- *Pulmonary Physiology and Pathophysiology: An Integrated, Case-Based Approach* – John West

**Research/Academic Expectations:**

- Attend one national conference/meeting – must communicate choice by September of first year and ensure entry on the fellows’ call and coverage schedule with the 1st year fellow assigned to maintain the fellows’ call schedule, as well as notify the Program Director, the Associate Program Director(s), and the Program Coordinator.
- Identify a faculty member to begin an individual project as outlined in the research curriculum.
- Produce a “publication quality” manuscript by the time of graduation
- Participate in one national multicenter trial or practice management guideline

**Mentorship and Supervision During the First Year**

**Professional Development Coordinator – 1st Year:** Dr. Stephen Gondek

- Fellows should identify one individual faculty mentor to serve as a faculty mentor for both academic and professional pursuits.
- Fellow should meet at least quarterly with Mentor to discuss progress, problems, conflicts, and career direction.
  - Written letters of progress by the Mentor to the Program Director copied to the fellows should be done bi-annually.
  - Mentors are to be evaluated by the fellows with a report to the Program Director.
- Fellow will meet at least quarterly with the Program Director to discuss academic development and career development.

**Administrative Expectations for First Year Fellows:**
In addition to those activities listed below, all first-year fellows are expected to complete procedural and productivity information in the AAST Case Log system and CC volume in the ACGME Log. *(For a more in-depth description on the administrative expectations, please see Appendix I)*

**Michael Derickson:**
- SICU resident and student call schedule
  - Ensure compliance with ACGME work hour regulations
- SICU resident and student evaluation process
  - Instructor: Milad Behbahaninia
  - Faculty: Adams/Eastham
- SICU M&M participation/reporting
  - Instructor: Milad Behbahaninia
  - Faculty: Smith

**Devin Gillaspie:**
- Fellow call schedule
  - Ensure continuous coverage in-house
  - Ensure compliance with ACGME work hour regulations
- Vacation and meeting schedule and reporting
  *Bi-annual deadlines of 9/1 and 3/1*
  - Instructor: Michael Lallemand
  - Faculty: Adams/Gondek

**Rodrigo Rodriguez:**
- SICU/TICU Resident Lecture Series
  - Organize monthly lecture schedule and coordinate faculty participation
  - Ensure resident attendance and timely completion of online modules
  - Responsible for distribution of schedule to all interested parties
  - Instructor: Jeremy Levin
  - Faculty: Eastham
- Supports the Trauma Research Conference
  - Faculty: Gondek

**Amelia Maiga:**
- Multidisciplinary Critical Care Fellows’ Conference
  - Responsible for lecture series and scheduling faculty
- Transitions for incoming and advancing fellows 2021
  - Instructor: Jeremy Levin
  - Faculty: Gondek
Second Year Fellow Expectations

The second year of the fellowship is designed to provide education in Acute Care Surgery and provides exposure to a variety of complex cases in trauma and emergency general surgery with attending-level clinical responsibilities (admitting and operative privileges) and in-depth mentoring. Additionally, full development of specialized skill sets in areas of interest for each fellow is to be completed.

Clinical Expectations:

Clinical Service coverage during the second year: The fellow (instructor) will participate in the call schedule with the other Trauma faculty.

- Typical Clinical Service coverage during the 2nd year:
  - 12-14 weeks of daytime coverage of the Trauma service (T2 – new alerts, stepdown and floor patients)
  - 12-14 weeks of EGS service (paired with Division faculty)
  - 3 weeks of vacation during non-clinical weeks
  - 2 weeks Interventional Radiology rotation
  - 2-4 weeks Cardiovascular or Thoracic Surgery (under development)
  - Remaining weeks academic/administrative/meetings/operative cases with faculty
  - Overnight call averaging ~ 1/9
  - May have additional requirements for home back up call during weeknights

- The fellow (instructor) is expected to work over either Christmas or New Years and have the other off.

Call responsibilities during 2nd year: Instructors take call as a credentialed member of the Division of Trauma and Surgical Critical Care faculty (Clinical Instructor).

Appropriate faculty-level participation on services as judged by the Division faculty
**IMPORTANT**

**Utilizing Back-up**
Fellows MUST notify back-up attending:
- When adverse outcome or death is likely and/or experience is limited
- Multiple operative cases or multiple alerts + OR
- Should discuss all critically ill or highly complex patients with senior faculty (SICU, Trauma, EGS, or T3/RGS services)

**For Instructors on Trauma night weekend service:**
- Faculty back-up responsibility is posted on the call schedule

**For Instructors on the “Trauma Day” service:**
- Must utilize senior Divisional faculty rotating on the other trauma services as available
- Hierarchy of backup coverage:
  - T3
  - T1
  - EGS/RGS
  - Other

**Educational Expectations:**
- Faculty-level participation in service-specific conferences, seminars, etc
- Attend Trauma Service or EGS Morning Report when on service and when non-clinical
- Regular attendance at conferences
- Self-directed education and completion of appropriate reading program

**Suggested Surgical Critical Care Texts:**
*Trauma* – Kenneth Mattox, David Feliciano, Earnest Moore  
*Management of Trauma* – Robert Wilson, Alexander Walt

**Research/Academic Expectations:**
- Attend one national conference/meeting – must communicate choice by September of second year and enter time away in Redcap after notifying the Program Director, the Associate Program Director(s), and the Program Coordinator.
- Complete research curriculum requirements as outlined (Publication quality manuscript, participation in national PMG or MCT)
Mentorship and Supervision During the First Year

Clinical Development Mentor – 2nd Year:
The instructor fellow will participate in the “Clinical Evaluation and Mentoring Program” and will be assigned a mentor for each quarter. To demonstrate their continued progress at attaining mastery of the care of the acute care surgery patient, the program will include monthly meetings with senior faculty to discuss all operative cases and complex resuscitations. This may include review of patient charts, radiographs and review of videotaped resuscitations.

Administrative Expectations for Second Year Fellows

In addition to those activities listed below, all second-year fellows are expected to complete procedural and productivity information in the AAST Case Log system on a weekly basis, and all fellows are expected to participate in the Trauma Outreach Program. *(For a more in-depth description on the administrative expectations, please see Appendix II)*

- **Michael Lallemand, M.D.:**
  - Burn curriculum development, PI, outreach, and research
  - **Faculty:** Gondek, Beyene
  - Supports Devin Gillaspie with call and vacation schedule
  - **Faculty:** Adams / Gondek

- **Milad Behbahaninia, MD:**
  - Direct the ACS Fellow’s conference
  - **Faculty:** Gunter
  - Administration for the Trauma Performance Improvement *August-January*
  - **Faculty:** Mike Smith, Melissa Smith
  - MDSCC ACNP – Liaison: *August – January*
  - Supports Michael Derickson with SICU Resident and student call schedule, evaluation process, and SICU M and M.
  - **Faculty:** Adams / Eastham

- **Joshua Smith, D.O.:**
  - Support Trauma Research Conference
  - **Faculty:** Gondek
  - Trauma Performance Improvement *February – July*
  - **Faculty:** Smith
  - Trauma Education Support (ATLS/ATOM/ASSET) – *August – January*
  - **Faculty:** Guillamondegui, Cathy Wilson, Chris Brown
  - Support Amelia Maiga with the Multidisciplinary Critical Care Conference
  - **Faculty:** Hayhurst/Gondek
Jeremy Levin Holzmacher, M.D.:
- SICU M&M/Process Improvement and Resident Orientation
  - Faculty: Eastham
- Trauma Education Support (ATLS/ATOM/ASSET) – *February thru July*
  - Faculty: Guillamondegui/Cathy Wilson
- MDSCC ACNP – Liaison: *August – January*
- Support Rodriguez with SICU Resident/Student Lecture series
  - Faculty: Eastham

- All 2nd year fellows will participate in the Trauma Outreach Program.
- All 2nd year fellows are expected to complete procedural and productivity information in the Case Log System (converting to ACGME log soon) on a weekly basis.

Conference and Meeting Schedules for All Fellows *(May alternatively be virtual)*

<table>
<thead>
<tr>
<th>Name</th>
<th>Day</th>
<th>Time</th>
<th>Location (if not virtual)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Educational Conferences</td>
<td></td>
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</tr>
<tr>
<td>Trauma/Emergency Resuscitation</td>
<td>Monday</td>
<td>11AM – 12PM</td>
<td>7th Floor Hanes House Conf Rm</td>
</tr>
<tr>
<td>Crit Care Fellows Journal Club/PBLD</td>
<td>Tuesday</td>
<td>12PM – 1PM</td>
<td>Anesthesia CC Conf Rm</td>
</tr>
<tr>
<td>ACS Fellows Conf</td>
<td>Wednesday</td>
<td>12PM – 1PM</td>
<td>404 Med Arts Bldg</td>
</tr>
<tr>
<td>SCC Fellows Conf</td>
<td>Thursday</td>
<td>12PM – 1PM</td>
<td>404 Med Arts Bldg</td>
</tr>
<tr>
<td>SCC Conf Series (SICU rotation - specific)</td>
<td>Tues – Thurs</td>
<td>1PM – 2PM</td>
<td>9T3 Crit Care Conf Rm</td>
</tr>
<tr>
<td>Surgery Grand Rounds</td>
<td>Friday</td>
<td>7AM – 8AM</td>
<td>214 Light Hall</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>Morbidity and Mortality Conferences</th>
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<tbody>
<tr>
<td>Trauma M&amp;M Conf</td>
</tr>
<tr>
<td>SICU M&amp;M Conf/PI/QA</td>
</tr>
<tr>
<td>Surgery M&amp;M Conf</td>
</tr>
<tr>
<td>QMMIC</td>
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</tbody>
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<table>
<thead>
<tr>
<th>Administrative Conferences</th>
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<tbody>
<tr>
<td>TPOPPS (Trauma QA/PI)</td>
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</tbody>
</table>
Division of Trauma & SCC Faculty Mtg | 1st and 3rd Wed | 3PM – 4PM | 404 Med Arts Bldg
Multidisciplinary SCC (SICU) Monthly Mtg | 4th Tuesday | 3PM – 4PM | 9T3 Crit Care Conf Rm

*For a more in-depth description of each conference, please see Appendix III. As of July 2020, most of the conferences are largely virtual.

Time Away Policies and Duty Hours

Duty Hours
Work hours are to be logged via an online system (New Innovations) daily for first year fellows. The program is committed to ensuring full compliance with duty hour policies set forth by the ACGME. In-house call will be managed via a night shift system. All fellows will have at least one full 24-hour period per week without clinical duties. Additionally, fellow work hours are to be limited to an average of less than or equal to 80 hours per week averaged over a 4-week block beginning the 1st day of the month and for the entire month. Schedules should ensure that all fellows have greater than 10 hours off between shifts and at least 14 hours off if after a 24hr call shift. On-call duties must be compliant with the 24+4-hour requirement mandated by the ACGME. Work hour violations can nearly always be anticipated, and it is the responsibility of the fellow to notify the program director if there will be violations.

The SCC fellows are responsible for organizing their schedules and ensuring that vacations and meetings are scheduled such that the above policy can be fulfilled. The schedule should incorporate the actual hours of clinical responsibility to facilitate timely departure from the hospital. Schedules are to be reviewed by the program director prior to publication, and the program director is to be notified in advance if conflicts arise that do not allow SCC fellow coverage of clinical obligations as outlined above.

Vacation/Sick Time Reporting
Vacation and sick time reporting are a requirement of the GME office. Three weeks of vacation are allotted per year, plus one sick day for each month of training completed. Fellows are discouraged from taking vacation during the months they are covering SICU days, SICU nights, and CVICU days. Please also take note of the MCCKAP exam dates to ensure you are present for the exam as well (usually sometime in March).

Leave of Absence/FMLA
Requests for leave will be facilitated through the GME office for the first-year fellows, and through Human Resources for the 2nd year fellows. The program coordinator can assist with all requests for FMLA. Whenever possible, leave requests should be submitted to the program director at least 30 days in advance. Emergency requests should be submitted as soon as the
situation allows. Each case will be considered on an individual basis and approved by the program director. In addition, the fellow will be fully informed as to his/her responsibilities during the absence, as well as the effect of the absence on completion date for the program and subsequent board eligibility for board certification. It is the fellow’s responsibility to complete the paperwork necessary for FMLA once the program coordinator sends the information.

**Time Away Requests (for meetings, interviews, etc)**
All requests for time away for conferences, interviews, or any other reasons outside of scheduled vacation **MUST** be approved by program director in writing. Once the approval is in writing, notify the program coordinator that you will be travelling, especially if you will be seeking reimbursement. You should also complete the Time Away Request Form in Redcap for the Trauma Division. Only after you have notified the program coordinator with the approval in writing should you book your travel.

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**IMPORTANT**

**YOU MUST BOOK ALL FLIGHTS FOR CONFERENCE TRAVEL VIA CONCUR – if you do not book via Concur, you WILL NOT be reimbursed for any flights.**

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**Call Schedule Postings**
Faculty and resident call schedules are available on Synergy at the end of each month for the upcoming month. Any subsequent changes to that schedule should be communication to the program director.

**Other Administrative Responsibilities**

**Licensure and Credentialing**

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**IMPORTANT**

Application for Tennessee Medical License is required for all moonlighting and matriculation to the second year. **First year fellows are expected to begin the application and submission process in August with the goal of being fully licensed by November or December.**

The program will cover any costs associated with obtaining the medical and DEA licenses, including the annual professional tax ($400) that is assessed to all licensed physicians in the state of Tennessee each June.

By January, first year fellows will be expected to have completed all faculty and hospital appointment paperwork in preparation for the second year of fellowship. Martina Hailey will reach out to you regarding the One Packet, which is the credentialing packet for faculty positions at VUMC.
Examinations
First year fellows will take the MCCKAP online exam (critical care “in-training” exam), usually it is in March. This will be arranged by the program coordinator. Please do not schedule vacation during this time frame.

It is highly encouraged that fellows pass the ABS Qualifying Exam and Certifying Exam for General Surgery. The online qualifying exam is only offered in July, and the certifying exam’s earliest administration date is typically October, which requires an ACTIVE medical license in order to register. This year has been atypical with national exam difficulties and may create future changes in exam dates and format, so pay careful attention to registration.

First year fellows will register for the Surgical Critical Care boards in June and take the exam in September of their second year. The program will cover fees associated with the exam – however – fellows must register for the early bird pricing. If late registration occurs, the fellow will only be reimbursed for the early bird price.

Second year fellows will take the AAST Acute Care Surgery examination, typically in May. This exam is 100 questions with a 2-hour time limit.
Expense Reimbursement

Several expenses are covered outright by the program throughout your training. These are required expenses (e.g., Medical license registration), which are necessary for continuation in the program.

For the academic year 2020-2021, fellows are not to exceed $5000 for conference fees or travel, textbooks, etc. Anything beyond the maximum amount is at the fellow’s own expense. All purchases and travel are to first be approved by the program director in writing.

<table>
<thead>
<tr>
<th>Program Responsibility</th>
<th>Professional Expense Provisions (not to exceed $5,000/yr)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Medical License application and professional tax (TN only)</td>
<td>• Academic meeting and travel associated (EAST, WTA, AAST, or SCCM) – one non-participatory meeting (full conference) only per year, and/or one participatory meeting with travel limited to around presentation date/time.</td>
</tr>
<tr>
<td>• DEA application</td>
<td>• Textbooks (1 trauma and 1 critical care text book only)</td>
</tr>
<tr>
<td>• MCCKAP Examination Fee</td>
<td>• Memberships/dues (EAST, SCCM, etc) – limit of 2 fees per year, some are free</td>
</tr>
<tr>
<td>• Board exam fees for Surgical Critical Care</td>
<td>• Lab coats</td>
</tr>
<tr>
<td>• Pager</td>
<td>• ATLS Instructor Course Fee (as applicable)</td>
</tr>
<tr>
<td>• ATLS Instructor Course Fee (as applicable)</td>
<td>• Desktop computers and office supplies</td>
</tr>
<tr>
<td>• Textbooks (1 trauma and 1 critical care text book only)</td>
<td></td>
</tr>
<tr>
<td>• Memberships/dues (EAST, SCCM, etc) – limit of 2 fees per year, some are free</td>
<td></td>
</tr>
</tbody>
</table>

Reimbursement Process
STEP 1: Contact the program coordinator first so that you receive proper assistance which can prevent delays with your reimbursement.

All requests for time away for conferences, interviews, or any other reasons outside of scheduled vacation MUST be approved by program director in writing. Once the approval is in writing, notify the program coordinator that you will be travelling, especially if you will be seeking reimbursement. You should also complete the Time Away Request Form in Redcap for the Trauma Division. Only after you have notified the program coordinator with the approval in writing should you book your travel.

IMPORTANT

**YOU MUST BOOK ALL FLIGHTS FOR CONFERENCE TRAVEL VIA CONCUR – if you do not book via Concur, you WILL NOT be reimbursed for any flights.**

*For the full Travel Policy followed by the Section of Surgical Sciences, see Appendix IV.*
Appendix I: 1st Year Fellow Administrative Descriptions:

**SICU resident and student call schedule and evaluation process**

- The fellow assigned to this task is responsible for completing the
  1. **SICU resident call schedule**
     - This includes determining the needs of the residents and developing schedule
     - Forwarding schedule to administrative coordinator (Dr. Adams’ Assistant) to publish appropriately
  2. **SICU resident and student evaluation process**
     - The fellow responsible for the process will ensure that fellows within the SICU for that month are aware of the evaluation process and complete in a timely fashion
     - Fellows provide draft copies to Dr Adams (or Dr Nunez in her absence) for review and completion.

**Administrative Responsibilities:**

1. Assigned fellow will be ADMINISTRATIVE DIRECTOR for this assignment.
2. **Dr. Adams** as Program Director and Director of SICU and MDSCC will be the faculty supervisor.
3. **Dr. Gondek** will assist Dr. Adams with the educational component and resident/student evaluations.
4. The program coordinator will provide administrative support and distribute schedules.

**SICU Morbidity & Mortality Conference**

- **Purpose:** to identify and discuss serious adverse events that may indicate process or knowledge deficiencies, to educate fellows regarding prevention of adverse events in complex settings, and to identify and prepare for the MDSCC/SICU presentation in the Department of Surgery’s M and M conference.
- **Methods:**
  - The Fellow responsible for the overall management of the conference will ensure that the fellows rotating each month understand the access to data, recording, and presentation methods.
  - The SICU fellow each month will be responsible for the identification and management of the data on a daily basis.
  - Utilize data collection sheets provided to record admission information and appropriate events on all patients with whom the ICU service is in consultation.
  - Monthly reports consisting of total admissions, morbidities and mortalities will be formatted for presentation at the last educational conference of each rotation.
  - Data maintained in Excel file for management.
- **Presentation:** The end of the month presentation will consist of three parts:
1. an overview of the morbidities and mortalities
2. a brief discussion of the morbidities with appropriate responsibility assessed for each M & M,
3. 30 to 45-minute presentation covering one topic represented by the M & M findings. The presentation should contain a literature review of the topic and two to three relevant articles for discussion. The literature should be prepared prior to the conference for distribution to the entire faculty and all fellows. A list of topics will be kept to avoid repetition over the course of a 12 to 24 month period.

**Attendance:** The attendance of the conference is mandatory when on SICU the current or previous month (will be expected to present SICU M&M the month following the rotation.) Invited guests will include the entire faculty for the SICU and any residents interested in the topic.

- **Administrative Responsibilities:**
  1. The fellow assigned will be ADMINISTRATIVE DIRECTOR for this assignment.
  2. 1st year fellows on SICU service to collect M&M cases and responsible for presenting.
  3. Dr. Shannon Eastham and Dr. Michael Smith will be the faculty supervisor.
  4. The program coordinator will provide administrative support.

**Multidisciplinary Critical Care Fellows Conference**

- Fellow assigned to administer this conference will work with the assigned faculty mentor to select topics, presenters (faculty within Division of Trauma and Surgical Critical Care, Anesthesia Critical Care, external faculty, and critical care fellows), format to cover topic outlined in a broad-based critical care format.

- **Scheduled topics:** Ideally, topics will cover a broad range of subjects of importance to critical care. Topics should address those areas outlined in the “Educational Goals and Objectives for Surgical Critical Care” section of the manual. To allow flexibility and to maintain the ability to cover what is of greatest interest to the fellows at any given time, the formal schedule of topics will be only set 5 weeks in advance. At the beginning of each month, the following 5 weeks schedule will be put forth.

- **Participants:** This is the fellow’s critical care conference and is directed to them. All Anesthesia CC and Trauma CC faculty, fellows, R-4s and anesthesia resident on the service will be invited. The junior residents and students will not be invited.

- **Attendance Policy:** No conflicting obligations are to be scheduled during conferences if at all possible. Availability of Critical Care faculty and timing of conference generally should enable the Critical Care fellows to attend conferences the vast majority of the time. Occasional acute care situations that arise during conferences may require a specific Critical Care fellow’s attention. The Multidisciplinary Critical Care Residents Conference is specifically provided for their education and therefore, faculty generally cover acute issues that arise at that time.
1) Administrative Responsibilities:
   1. **Assigned fellow** will be ADMINISTRATIVE DIRECTOR for this conference.
   2. **Dr. Raeanna Adams and Dr. Christina Hayhurst** will be the faculty supervisors.
   3. The program coordinator will provide administrative support and distribute schedules.
   4. The **administrative director** is responsible for determining the format each week, selecting
      the speakers, topics, or articles for the conference with close assistance and supervision
      by Drs Hayhurst/Adams.
   5. Attendance records and evaluations will be maintained for RRC and CME documentation
      purposes

1st year fellows’ call, vacation, meeting and time away schedule

- The fellow assigned to this role is responsible for
  - Completing the fellows call schedule each month
    - Working with fellowship coordinator to manage and publish schedule
    - Ensuring compliance with ACGME resident work hour guidelines
    - Ensuring continuous coverage in-house at night
    - Communicating and problem solving with Program Director in a timely fashion
      if goals cannot be met
  - Maintaining a excel log with administrative coordinator of the vacations, meeting, time
    away for the year
    - Should develop a draft plan for the year by August 31

- Administrative Responsibilities:
  1. Assigned fellow will be ADMINISTRATIVE DIRECTOR for this assignment.
  2. **Dr. Gondek** as Associate Program Director will be the faculty supervisor.
  3. The program coordinator will provide administrative support and distribute schedules.

SICU/TICU Resident Orientation and Lecture Series

Didactic conference for residents and students rotating in the SICU and TICU. Each Tuesday,
Wednesday, and Thursday Faculty and surgical critical care fellows provide lectures and
supervisory role.

**Participants:** Faculty, fellows, residents, students rotating in the SICU and TICU. Monday and
Friday teaching in a Socratic style on rounds will be primarily encouraged.

- Administrative Responsibilities:
  1. The assigned fellow will be ADMINISTRATIVE DIRECTOR for this conference.
  2. **Dr Shannon Eastham** will be the faculty supervisor.
  3. The fellowship coordinator will provide administrative support and distribute schedules.
Appendix II: 2nd Year Fellow Administrative Descriptions:

Trauma Performance Improvement

- The assigned fellow will work closely with Dr. Michael Smith /Melissa Smith (or PI nurse when in place) in the ongoing PI process for the trauma program. The goal for the fellow assigned will be that they can develop, implement, and manage a performance improvement plan approved by the American College of Surgeons.

Responsibilities will include the following.

1. Reviewing cases that have been identified through the PI process. This will include morbidities and mortalities.
2. Identifying/selecting cases to be presented at the appropriate peer review setting (General surgery M & M, MDTC, TPOPPS etc.)
3. Work to develop solutions for problems identified through the PI process, this may include Practice management guideline development, system/process changes, and counseling sessions for involved team members from identified cases.

Deliverables:

1. Working knowledge of TRACS system
2. Understand PEER REVIEW process
3. PMG updates

Trauma Education

- The assigned fellow will work closely with Cathy Wilson/Chris Brown/Dr. Oscar Guillamondegui in our trauma educational process. The goal for the fellow assigned will be to develop the ability to create, implement and manage a comprehensive trauma educational program. Their responsibilities will include the following.

1. Training as instructor for ATLS, ATOM and ASSET, Coordinate and instruct for ATLS, ATOM, and ASSET.
2. Develop an internal educational process based on identified cases from our PI process to disseminate to our providers and our subspecialty colleagues. This will meet the need for our colleagues who do not obtain enough trauma specific CME for our ACS Level 1 Verification. The fellow will disseminate monthly to all providers a newsletter with trauma specific educational issues identified from the PI process.
Deliverables:
- Director status for ATLS, ATOM and ASSET
- Monthly educational materials database for recurrent use over a 24-month system

**Outreach**

- All second-year fellows will work with Cathy Wilson/Melissa Smith/Dr. Oscar Guillamondegui in our outreach program. The goal for the fellow will be a complete understanding and management of a lead trauma center in a large regional trauma system. Their responsibilities will include:
  a. Insuring appropriate follow up and feed back to our referring hospitals, physicians, and EMS providers.
  b. Will communicate and/or travel to outside institutions for educational programs and academic detailing when our PI process has identified performance issues at particular institutions.
  c. Will attend and participate at regional and state level trauma system meetings/processes
  d. Rural Trauma Team Development course (RTTDC) involvement

Deliverables:
- Regional level presence at the STATE and ACS COT region 9 meetings
- Outreach letters for Positive and Negative outcomes for regional distribution
- Outreach CME credit lecture for use at regional outreach activities
Appendix III: Educational Conference Descriptions

**Trauma Service and Emergency General Surgery Morning Reports:**

The problem of safe and efficient transfer of care has increased over the past decade as resident work hour restrictions have been implemented, an ever-increasing number of diagnostic tools has become available, and an increasing percentage of complex patients has become concentrated at fewer and fewer facilities. In an effort to accomplish these educational responsibilities, centralize information handling, and facilitate the management and transfer of patient care information, a formalized morning report system will be conducted. This will improve the quality of the information transferred during the sign-out process, enhance resident and physician extender efficiency, provide an open forum for discussing the diagnostic work-up and management of the acutely injured patient, and improve the quality of the resident didactic experience. An organized sign out process will utilize the presence of post-call team members, a large chalk/marker board to organize and identify patient encounters (listed by alias), and a digital viewer allowing access to previous radiographic studies obtained over the previous 24-hour period.

**Trauma/Emergency Department Resuscitation Conference:**

This is a joint ED/Trauma quality assurance/process improvement conference with the Emergency Medicine Department that reviews the evaluation and resuscitation of critically ill trauma. Videos of resuscitations are reviewed for assessment of quality and performance improvement purposes. This is coordinated and moderated by Kevin High, RN.

**Critical Care Fellows Journal Club/PBLD:**

Weekly conference administered and hosted by Anesthesia Critical Care that alternates formats, covering both a journal club format and problem-based learning and development.

**Acute Care Surgery (ACS) Fellows Conference:**

Weekly conference administered by the Division of Trauma and designed to provide Acute Care Surgery Fellows with in-depth knowledge of topics pertinent to the advanced delivery of care and operative management in trauma and emergency general surgery. The format is intended to be a fellow/attending level discussion of up-to-date topics in Acute Care Surgery with majority participation of faculty and trainees when possible. The conference combines topics such as surgical management, administrative issues, epidemiology, citizenship and social media, billing/coding/business and in-depth case reviews in a roundtable session to maximize participation and engagement.
Multidisciplinary Critical Care Fellows Conference:
Weekly conference administered by the Division of Trauma, designed to provide Anesthesia and Surgical Critical Care Fellows with in-depth knowledge of topics pertinent to the advanced delivery of Critical Care Medicine. The conference may alternate in format between Socratic topic reviews provided by invited speakers or Critical Care Faculty, topic review seminars provided by the Critical Care Residents, and journal club format in which the first-year fellows pick articles to be discussed. Handouts for the seminars and recent and/or landmark articles relevant to the topic will be selected and provided for review by attendees prior to the meeting.

Surgical Critical Care Resident’s Conference:
This didactic conference is for residents and students rotating in the SICU. Each Tuesday, Wednesday, and Thursday, from 1P-2P in the SICU 9T3 Conference Room, lectures incorporating material from the resident intensive care unit education course from the Society of Critical Care Medicine will be given. Faculty and instructors provide lectures and supervisory role.

Surgical Critical Care Divisional Research Conference:
The goal of the Research Conference is to provide research training incorporating elements of study design, biostatistics, funding mechanisms, ethics and resources available at divisional, institutional and departmental level.

Trauma Morbidity and Mortality (M&M) Conference:
Monthly conference where in-depth discussions of trauma related morbid and mortal outcomes are discussed by fellows and residents. Selected cases are then presented at the Department of Surgery M and M.

SICU Morbidity and Mortality (M&M) Conference:
The goal of M&M is to identify and discuss serious adverse events that may indicate process or knowledge deficiencies amongst team members in the SICU. It provides a venue for fellow education regarding prevention of adverse events in complex settings and allows preparation for the SICU presentation in the Department of Surgery’s M & M conference. The SICU fellow for the month will be responsible for the identification and management of the morbidity and mortality data on a daily basis. Admission data will be provided by the Process Improvement nurse prior to the conference. Please see Appendix 11 in the fellows’ manual for additional detail.

SICU Process Improvement and Quality Assurance Conference:
Intensivist/physician driven efforts to improve the delivery of care within the ICU realm are mandatory if patient care is to be maximized. Such efforts are complex, labor intensive and mandate involvement of multiple care groups and harmonious interfaces with broader systems within the hospital. The SICU has a well formed and established Process Improvement system
and committee. All fellows are encouraged to attend the meeting, but attendance is mandatory during their SICU rotation and when systems issues identified in M & M require presentation at the PI/QA level. The organizational structure is shown below. Fellows in the SICU for the month should review and present all morbidities and mortalities and will receive their Practice Habits comparison data in this format to demonstrate performance level compared to peers.

TPOPPS (Trauma QA/PI) Conference:
Monthly quality review, assessment of performance measures, and referral for process improvement of cases identified and reviewed by trauma coordinator and PI chair. All faculty, instructors, and fellows on trauma attend.

Division of Trauma Faculty Meeting:
Bimonthly meeting of all faculty, fellows, and administrative support from the Division of Trauma for the discussion of quality, educational, administrative, financial, and personnel issues that affect the Division related to Trauma, EGS, RGS, and SICU. First and second year fellows should make every effort to attend.

Multidisciplinary Surgical Critical Care Meeting:
Monthly meeting of Surgical and Anesthesia Critical Care faculty, fellows, ACNP leadership, nursing leadership, and PharmD for the discussion of quality, educational, administrative, financial, and personnel issues for the Surgical ICU.

Currently, many conferences are virtual by Zoom or other methods. Fellows are expected to attend all the above conferences when they are available, and those are considered protected time except in cases of dire patient emergencies and no other available coverage. The night fellows are excused except for Grand Rounds and M&M. Additional conferences are available throughout the medical center. The Fellows will be invited to additional conferences through the Anesthesia Critical Care program and are invited to attend if they are available and the topic is relevant to surgical critical care or otherwise interested.
PURPOSE:
Vanderbilt University Medical Center’s travel policy is designed to support the following aims:
- Support the efficiency and safety of those traveling on Vanderbilt University Medical Center (VUMC) business;
- Comply with external funding requirements; and
- Manage Medical Center resources prudently.

SCOPE:
This policy adheres to the common element Scope statement presented in the Finance & Revenue Cycle Policy on Policies.

DEFINITIONS:
- **Appropriate**: Suitable or fitting – in the eyes of an objective third party - for a valid business purpose.
- **Allowable expense**: A necessary, reasonable, and appropriate expense incurred for the primary benefit of VUMC business and therefore permitted to be reimbursed or directly charged based on the permission of the VUMC or by the terms of a sponsored agreement.
- **Business meal**: Meals with a clearly substantiated business purpose that are directly associated with the active conduct of VUMC business.
- **Business purpose**: A purpose that confirms a good, service, or activity is necessary to fulfill the mission of the VUMC and is of primary benefit to the VUMC rather than the individual; a purpose that can be well defended under public scrutiny or audit.
- **Business travel**: Travel for conducting business for the primary benefit of the VUMC's mission.
- **Entertainment**: Expenses that are social and/or celebratory in nature. Entertainment expenses may include food and beverages, alcohol, catering services, banquet facilities, decorations, and musical groups.
- **Necessary**: Required to achieve a business objective.
- **Reasonable expense**: An expense that is ordinary - not extreme or excessive - and reflects a prudent decision to incur the expense on behalf of VUMC business.
- **Receipt**: A legible, electronic image of the original merchant receipt or invoice issued by the supplier or service provider to document and substantiates the business transaction.

POLICY:
VUMC reimburses reasonable and necessary business-related travel expenses in as expeditious a manner as is practicable. Travelers should neither gain nor lose personal funds because of business-related expenses incurred on behalf of VUMC.

All employee reimbursements should be submitted via the Concur expense tool. Guests and students traveling on behalf of VUMC should be reimbursed via check request.

VUMC's travel tool supports the VUMC travel policy. If departments, centers, etc. choose to have more restrictive policies, these policies will be supported at the local level. Center, department and divisional business officers are responsible and held accountable for the implementation of and adherence to this
policy. Approval of travel plans, and other business-related expenses happens at the department level through effective planning, communication and management.

Exceptions to this policy require approval of the Chief Operating Officer and the Chief Financial Officer.

1. AIR TRAVEL
   1.1. Air Reservations
       Except for extreme cases necessitated by business needs and/or to preserve personal safety, air reservations should be made through the online booking tool or, in the case of international or complex itineraries, directly with the designated travel agency. All airfare must be purchased with either a personal credit card or VUMC issued Travel & Entertainment Card at the time of ticketing.

   1.2. Fares/Ticket Types/Class of Service
       Travelers should purchase the lowest available economy class airfare that meets the business needs of the travel, except as outlined below. Travelers may upgrade the level of service at personal expense or by using their personal airline rewards points/miles/credits. Reasonable fees associated with priority boarding and economy class upgrades (e.g., Economy Plus, exit row, aisle seat, etc.) are reimbursable.

       Business class or first-class seating may be used only if the traveler’s applicable officer approves it in writing in advance. One of the following conditions should be met:
       - Any flight segment has a scheduled in-air flying time more than four hours; or
       - The total scheduled in-air flight time for all flight segments is more than seven hours; or
       - A medical justification has been documented and approved by the Equal Opportunity, Affirmative Action, and Disability Services Department (EAD).

   1.3. Changes, Cancelations, and Unused Tickets
       When travel plans must be changed due to business reasons, the traveler is responsible for notifying the travel agency, so the unused ticket can be applied to the next business trip. Penalties for changes to an airline ticket for business reasons or circumstances beyond the traveler's control are reimbursable from VUMC funds. For affected tickets paid from federally-sponsored funds, contact VUMC Finance Grant Accounting to determine if the penalty may be charged to the grant.

       Unused tickets may not be used for personal travel.

   1.4. Pre-Travel Reimbursement
       For out-of-pocket airfare incurred by the traveler in advance of travel, the traveler may seek reimbursement in accordance with the guidelines of the funding source. If the funding source is restricted, please coordinate with your business administrator to ensure compliance with external restrictions. Should the trip be cancelled the reimbursement should be returned to VUMC. Airline tickets may be held for future use.
1.5. **Baggage Fees**
Baggage fees that are reasonable and appropriate for the purpose and length of the trip are reimbursable. Fees for baggage that is personal in nature (e.g., golf clubs) or that are not reasonable and appropriate for the purpose and length of the trip will not be reimbursed.

1.6. **Private Aircraft**
In general, VUMC faculty and staff members are prohibited from using non-commercial (private/corporate/state owned, rented, or borrowed) aircraft (fixed-wing or rotary) for VUMC business travel. Exceptions to this prohibition require written approval in advance of committing to the travel from both the Office of Risk and Insurance Management (https://www.vumc.org/risk-management/management) and the Chief Financial Officer.

1.7. **Airline Requirements for Federally Funded Sponsored Research Projects**
- **Fly America Act**
  The Fly America Act (FAA) requires the use of a U.S. air carrier for federally funded foreign travel. In some instances, a non-U.S. air carrier may be used if it meets one or more of the exception criteria listed in the Federal Travel Regulation (FTR) guidelines section 301-10.135-138, available online: http://vu.edu/fly-america-act.
- **Code Share Agreement**
  The Code Share Agreement provides for compliance with the Fly America Act if the U.S. air carrier is the ticketing agent and issues a flight on a non-U.S. air carrier. The payment for the airfare must be made to the U.S. air carrier.
- **Open Skies Agreement**
  The Open Skies Agreement provides that qualifying travelers, whose travel is supported by federal funds, may travel on airlines headquartered outside of the United States in countries where bilateral/multilateral agreements exist. For a listing of Open Skies Partners, visit http://www.state.gov/e/eb/rls/othr/ata/114805.htm. For the Open Skies Agreement exception to be allowed and selected in the Fly America Waiver Checklist, two criteria must be met:
  - Travel is not being reimbursed by the Department of State or the Department of Defense; and
  - The traveler ensures the air courier is Open Skies Compliant. More information about the agreement is available at http://www.gsa.gov/portal/content/103191.

2. **HOTELS**

2.1. **Hotel Reservations**
VUMC travelers should use the online booking tool or the VUMC travel agency to book hotel rooms (available at https://sso.vanderbilt.edu/idp/startSSO.ping?PartnerSpId=concur_vumc). If lower rates for accommodations are available through a conference room block rate or a fraternal/professional society these may be booked directly by the traveler.
2.2. **Hotel Class and Rooms**

The class of hotel should be reasonable and appropriate for the business purpose and location. Travelers should stay in standard or equivalent rooms.

3. **AUTOMOBILE RENTAL**

3.1. **Rental Car Reservations**

VUMC travelers should use the online booking tool or the VUMC travel agency to book rental cars (available at [https://sso.vanderbilt.edu/idp/startSSO.ping?PartnerSpId=concur_vumc](https://sso.vanderbilt.edu/idp/startSSO.ping?PartnerSpId=concur_vumc)).

3.2. **When to Use**

Rental cars should be used when they are less expensive than alternative means of transportation (e.g., taxi, car service, or train) or where there are convenience or safety issues that justify the additional cost.

3.3. **Car Class and Features**

Rental of a vehicle to a mid-sized (intermediate) car is reimbursable. If there are three or more individuals traveling together, if the traveler is transporting sizeable equipment, or if there are other valid business needs, larger vehicles may be rented. The cost of a GPS will be reimbursed if deemed necessary for safety reasons; however, this cost may not be charged to federal funds. The cost of other upgrades or accessories, such as a satellite radio, will not be reimbursed.

3.4. **Fuel for Rented Automobiles**

Travelers should refuel the rental car prior to returning to the rental agency and to decline the pre-paid fuel options. The cost of fuel will be reimbursed.

3.5. **Incidental Rental Car Expenses**

All business-related tolls and parking charges will be reimbursed. Tickets or fines associated with parking or travel violations, and charges for vehicle lockouts will not be reimbursed.

4. **LOCAL TRANSPORTATION**

Reasonable and necessary costs of public transportation, airport shuttles, taxis, and car services (e.g. Uber, Lyft) are acceptable for service to and from airports, between appointments, and between hotels and meeting locations.

5. **BUS OR RAIL**

Travel by bus or rail is allowed when it is less expensive than alternative means of transportation or when there are conveniences or safety issues.

6. **TRAVEL VIA PERSONAL AUTOMOBILE**

6.1. **Acceptable Use**

Use of personal automobiles for business travel is allowed when it is less expensive than alternative means of transportation or when there are convenience or safety issues that
justify the additional cost. Use of personal automobiles for normal commuting will not be reimbursed.

6.2. Mileage Reimbursement
Business mileage is the travel an employee incurs beyond normal commute mileage (from home to the office and home again on a normal workday). Exceptions can be granted based on the employees work requirements with approval of the department. When a personal automobile is used for business travel, the traveler will be reimbursed up to the current IRS authorized mileage rate for miles incurred. The mileage reimbursement covers all costs related to the operation of the vehicle, including service, maintenance, insurance, depreciation, and fuel. For additional guidance or questions regarding mileage reimbursement, please email VUMCconcur@vanderbilt.edu

6.3. Parking and Tolls
Reasonable parking charges and tolls associated with business travel will be reimbursed.

7. MEAL AND ENTERTAINMENT EXPENSES
7.1. Meal and Entertainment Expense Reimbursement Guidelines
Expenses for meals are reimbursable on the basis of actual, reasonable expenses incurred. VUMC does not utilize per diem rates. In situations where an individual is conducting business with one or more non-VUMC guests, reasonable meal and entertainment expenses are allowable except where noted below. Business meals and entertainment must be directly related to VUMC business, and the business purpose must be documented in writing.

Meal expenses exceeding a reasonable amount should be recorded as entertainment expenses. All entertainment expenses must be isolated from direct or indirect charges to sponsored funds. Entertainment, including alumni and development expenses, cannot be charged to sponsored restricted centers.

7.2. Alcoholic Beverages
Alcoholic beverage costs generally are considered personal expenses. However, if appropriate and necessary to support the business purpose, the charges must be classified as entertainment expenses, regardless of the funding source. In cases where a meal includes alcohol, and when that meal is going to be charged to a sponsored grant or contract, the traveler must clearly identify and segregate the alcohol expense during the reimbursement request process. Alcohol expenses must be charged to a non-sponsored funding source.

7.3. Meal and Entertainment Documentation
The Internal Revenue Service requires all business meals and entertainment expenses to be properly documented. This includes a list of attendees with titles and affiliation, or identification of a discernible group, the number of attendees, the geographic location in which the expense was incurred, the date of the expense and its business purpose.
8. COMMUNICATIONS EXPENSES
8.1. Telephone Usage While Traveling
Long distance phone and fax expenses that are reasonable and necessary for conducting business are reimbursable. When necessitated by business need, temporary international charge plan additions to personal cell phones will be reimbursed.

8.2. Internet Access
Internet access (e.g., hotel, airport, airline, etc.) during travel for business purposes is reimbursable.

9. INSURANCE AND RISK MANAGEMENT
9.1. Business Travel Accident Insurance
While traveling on VUMC business, faculty and staff are covered by the VUMC's business accident insurance policies. Commuting to and from work is not covered. VUMC's travel accident policy provides $100,000 for accidental loss of life and up to $100,000 for accidental dismemberment. If a claim is incurred while traveling on VUMC business, all necessary documentation must be provided to the Office of Risk and Insurance Management (https://www.vumc.org/risk-management/) after the incident.

9.2. Car Rental Insurance
Automatic liability coverage for bodily injury, property damage and physical damage to a rental car is provided by VUMC. When traveling on domestic VUMC business, decline Collision Damage Waiver (CDW) and personal liability insurance offered through the rental company. When traveling on foreign VUMC business, purchase additional rental car insurance if offered.

9.3. Personal Automobile Insurance
Faculty or staff members, and students who use their own automobiles or other individually-owned, non-rented vehicles to conduct VUMC business are responsible for the automobile liability and physical damage associated with the operation of that automobile. VUMC's insurance coverage provides secondary coverage. The traveler's personal insurance is primary in the event of an accident.

9.4. International Travel Emergency Assistance
International SOS ("ISOS") provides worldwide access to emergency medical, security and travel assistance and evacuation services for VUMC faculty, staff, students and employees while traveling outside the United States on VUMC business. ISOS services assist the traveler with access to medical, personal, travel, security and legal services when away from home. Reservations made through VUMC's online booking tool or through VUMC's travel agency are registered automatically with ISOS. Additional information on ISOS services is available from the VUMC International Office (VUMC Global Services)
9.5. Accidents, Injuries, Thefts, and Other Safety Issues
Accidents, thefts, and other crimes while traveling on VUMC business must be reported immediately to the proper authorities, consistent with local/state laws. If a traveler is injured or develops a work-related illness while traveling, the traveler should consult with Risk Management ([VUMC Risk Management] or call 615-936-0660) to determine whether he/she may be entitled to workers’ compensation benefits. Alternatively, affected employees may electronically report a First Report of Work Injury through the Risk Management website.

10. OTHER TRAVEL CONSIDERATIONS
10.1. Approval to Travel
Travelers are responsible for ensuring that they have the necessary approval from their supervisor to take a trip prior to committing VUMC funds or incurring expenses. Additionally, travelers are responsible for coordinating with the appropriate department to ensure that funds are available to pay for the travel.

VUMC travelers are responsible for understanding and adhering to specific restrictions that may be required by the applicable funding agency, sponsor or other outside group paying for the travel. These restrictions, to the extent that they are more restrictive than VUMC’s travel policy, supersede any restrictions outlined in this policy. Travel supported by sponsored programs contracts and grants may require prior written agency and/or internal approval. Travelers should refer to applicable grant or contract requirements and regulations to determine whether prior agency approval is required and if other restrictions apply.

Community Partners for Sponsored Projects
Cash advances for community partners, can be granted upon authorized approval by the department responsible for the management of the Federal Grant. The department will be required to document procedures for the management of the advance and distribution of funds to the grant.
This will also include reconciliation of all funds associated with the project according to the documented departmental process agreed with the Office of Finance - Grants.

10.2. Receipt Requirements
For a business expense to be approved and reimbursed, it must be properly substantiated. Itemized receipts for all expenditures greater than or equal to $25 are required. Appropriate receipts should include transaction amount, itemization of goods or services purchased, method of payment (receipt showing last 4 digits of card number), date and merchant name. If sponsor or departmental requirements are more restrictive, this will take precedence.
When the original receipt is not available or does not contain adequate information, a copy of cancelled check, credit card statement or paid invoice may be substituted. If none of those are available, a missing receipt affidavit may be used. The missing receipt affidavit can
be found in the employee expense tool and can only be accessed by the employee (delegates do not have access to this function).

10.3. IRS Accountable Plan
In accordance with IRS regulations, travel expense reports submitted more than 60 days after trip completion will be treated as taxable wages. Non-travel expense reports not submitted within 60 days of incurrence, will be treated as taxable wages.

10.4. Taxes
VUMC is a non-profit institution, and as such is exempt from tax on most domestic purchases when the VUMC tax exempt certificate is presented and the expense is paid with a VUMC issued credit card. However, tax exemptions vary by state and by type of good or service purchased. VUMC business travelers must make every reasonable effort to ensure that tax is not paid when appropriate. A list of states in which VUMC is exempt from sales tax is available from the VUMC tax department.

Foreign Value Added Taxes (VAT) and Goods and Services Taxes (GST) incurred for VUMC business are reimbursable.

10.5. International Travel / Passports and Visas
Expenses related to visas and passports required for business travel are reimbursable.

10.6. Vaccinations
Expenses for vaccinations required for business travel are reimbursable. VUMC travelers are strongly encouraged to obtain vaccinations through the Occupational Health Clinic (occupationalhealth.vanderbilt.edu) and/or the VUMC Travel Clinic (vanderbilttravelclinic.com).

10.7. Combined Personal and Business Travel
If personal travel is combined with VUMC business travel, only the business portion of the trip is reimbursable. VUMC’s travel tool should not be used to make personal travel arrangements. You may use the travel agency to make personal travel arrangements; however, it is not reimbursable. “In lieu of” and “tradeoff” expense reimbursement is not permitted (e.g., although incurring a Saturday stay might reduce the cost of a flight, the traveler may not use the difference to offset all or part of his or her personal expenses).

10.8. Spouse, Domestic Partner, and Dependent Expenses
No travel expenses, including but not limited to, transportation, lodging, meals, or registration fees for any persons accompanying travelers on VUMC travel will be reimbursed.

10.9. Laundry Expenses for Extended Trips
Reasonable and necessary laundry and/or dry-cleaning charges will be reimbursed when travel exceeds four or more consecutive nights. The charge must be incurred while traveling (not before or after the trip is complete).
10.10. **Tips and Incidental Expenses**
VUMC will reimburse reasonable tips. Tips greater than 25% will not be reimbursed.

10.11. **Frequent Flyer/Guest/Reward Points**
Travelers may utilize travel-provider rewards related to travel (e.g., Delta Sky Miles, Marriot Rewards, etc.). In no case shall VUMC business travelers incur additional expense on behalf of the VUMC with the sole purpose of obtaining more rewards (e.g., purchasing more expensive tickets in exchange for higher reward points). Enrollment fees for these programs are a personal expense and are not reimbursable.

II. **UNALLOWABLE EXPENSES**
All expenses incurred on VUMC business should be reasonable and necessary. Examples of non-reimbursable expenses include but are not limited to the following:

| Annual fees for personal credit card | Hotel or car “no-show” charges without a business purpose | Personal entertainment (e.g. sporting events) |
| Babysitting | In-room entertainment (e.g., movies, games, etc.) | Personal property insurance |
| Barbers / hairdressers | Membership (including airport clubs) and reward fees | Pet care |
| Car service for normal commute | Meals for social occasions or local meals with VUMC employees | Prescription medication |
| Car washes and detailing | Non-business postage | Shoeshine |
| Clothing, luggage and toiletries | Optional baggage insurance | Souvenirs and personal gifts |
| Personal mobile phones and data devices | Parking and/or speeding tickets | Vacation and personal expenses when on business trips |
| Delinquency and late fees | Personal accident insurance |

Expense reports should be held until they total at least $50 before submission. No reports under $50 will be approved unless they are approaching the 60-day reimbursement limit.

Any traveler who receives reimbursement for business travel expenses through the on-line travel tool, or otherwise, is responsible for reimbursing VUMC for any expenses deemed disallowed (unallowable, unnecessary, unreasonable, or inappropriate) under this Travel Policy and waives any applicable rights related to recovery of these expenses under federal and state law. If a traveler disagrees with a decision that an expense is disallowed, he or she may contest the decision through the VUMC Travel & Payment Card Office. If the traveler does not fully reimburse VUMC for any disallowed expenses, and the review process (if used) upholds the determination that the expenses are unallowable, then VUMC may utilize other means to collect any amounts owed,
including but not limited to a civil suit or criminal prosecution as appropriate under the circumstances. If deducting available amounts by payroll deduction does not result in full repayment, VUMC is not waiving its right to collect the remaining funds by other means necessary.

In addition, if appropriate under the circumstances, disciplinary action may be taken under Human Resources policies or other appropriate internal policies.

12. DUTY OF CARE

Vanderbilt University Medical center has a responsibility to protect its employees as they travel for business. As such, our responsibility covers the following areas; International Travel Advisories, Illness during Business Travel, and Emergency Assistance.

International Travel Advisories

Safety and security are of primary importance when employees are traveling on company business. Travel advisories that restrict travel for safety or health purposes are issued regularly by local government agencies. More information can be found on the VUMC Global Support website: https://ww2.mc.vanderbilt.edu/globalsupport/

Illness During Business Travel

If an employee becomes ill while on business travel and is unable to perform the duties of his/her job, they must report the illness or injury to their manager as soon as possible.

Emergencies

In the event of an emergency abroad that requires assistance beyond or in addition to what the local authorities can provide, please contact ISOS at +1-215-942-8226 (call collect). VUMC’s membership number is 11BTA1676447.

International SOS (ISOS)

ISOS provides emergency travel assistance and evacuation services for all faculty, staff, and residents traveling internationally on VUMC-related business.

- Click here to access the ISOS portal.
- Review health, safety and security information specific to your international destination AND print your ISOS membership card by accessing the link above.
- Register your travel on the "My Trips" login option from within the portal.
- Download the ISOS Assistance App for your smartphone.
Contact Information
Questions regarding the interpretation of this policy should be directed to:

Email: financepolicy@vumc.org

APPROVAL:

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<tr>
<th>Committee/Title</th>
<th>Chairperson/Designee</th>
<th>Date</th>
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<tr>
<td>VUMC Finance and Revenue Cycle Policy Committee</td>
<td>Cecelia Moore, Associate Vice Chancellor, VUMC</td>
<td>December 2018</td>
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<td>Dr. David Ralford, Associate Vice Chancellor for Health Affairs, VUMC</td>
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