



IMPAIRMENT

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LETTER: PLAN OF REMEDIATION DURING CORRECTIVE ACTION

[Date]

S. Smith, MD*

Department X

University Hospital X

Dear Dr. Smith:

Your plan of remediation during corrective action consists of:

1. You will work with Drs. Jones*, Casey*, and Dernavich* as designated on your rotation schedule. In addition, your Tuesday clinic with Dr. Sheehan* will be changed to clinic with Dr. DeSanto* beginning [date]. You should seek the assistance of these attendings in clinic to help you with any part of the examination with which you are not comfortable. They will assess your examination skills during supervised clinics and will provide feedback to you on your progress. At the end of each clinic session they will complete a written evaluation and forward it to my office for your file. You should complete each written note and have it signed by Dr. Sheehan by [date].
2. You should complete all reading assignments given to you by the faculty. In addition, you should read the following assignments: [specify material] by [date], and you will be tested on this material. You should read about specific patients' problems that you encounter in clinic and be prepared to discuss these patients with attendings.
3. You will be assigned no more than five patients per half day in your Friday afternoon clinic.
4. You should practice your patient presentations with Dr. Jones* before giving them to the department, so that she can provide recommendations for improvement. You should know all the pertinent details regarding any case that you are going to present.
5. You should call the GME office at [phone number] to make an appointment to meet with Dr. Scurlock* within the next 2 weeks.
6. We will meet (weekly, every other week, monthly) to review your progress. Please see me if you have any questions regarding specifics of your remediation.

Sincerely,

J. Doe, MD*

Residency Program Director

I have read the above statement and understand the terms of my remediation.



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LETTER: PLAN OF REMEDIATION DURING CORRECTIVE ACTION (CONT'D)

(Signed) S. Smith, MD*

*None of the names in this document refer to actual people

It is recommended you add your institution-specific peer-review language to this document, e.g.: "This evaluation is confidential and is intended only for the program's use and that of the trainee. The information contained herein may be confidential under the attorney/client privilege and/or the quality-assurance and peer-review privilege."

Some programs might give resident the option to resign.

It is advisable to put in writing for the trainee what the final summary of the program will be, e.g.: "This confirms that Dr. [name] entered the [field, e.g., obstetrics] residency program [date] and [appropriate terminology, e.g., "resigned" or "his/her contract was not renewed"]. Dr. [name] successfully completed [number] months of training, specifically in [fields]."

"An assessment of his/her competencies indicates [key items in assessment]. The [field] Board was notified of this [date]."