



**San Antonio Uniformed Services
Health Education Consortium
San Antonio, Texas**

**Policy for Reporting Adverse Academic Actions and
other Adverse Incidents to the Air Force Risk Management and
Army Quality Management Offices and to State Medical Licensing Boards**

I. Purpose: The purpose of this policy is to develop an efficient process which will allow San Antonio Uniformed Services Health Education Consortium (SAUSHEC) program directors (PDs) to comply with state medical board reporting requirements, whenever adverse actions are taken against residents holding training permits or medical licenses. The term “residents” includes all physicians assigned to postgraduate medical training programs. References for this policy are AR 40-68 and AFI 41-119.

II. Background: All DoD physicians are required to have an active, valid, unrestricted medical license by completion of their second postgraduate year. Physicians may become licensed in any U.S. state, protectorate or territory, and the majority of SAUSHEC trainees apply for licenses in states with low cost and prompt application processing.

A. The majority of SAUSHEC graduate medical education programs assign residents to rotations at hospitals outside the consortium to obtain experiences unavailable at military facilities. Residents and fellows working at non-federal hospitals in Texas must obtain Texas Physician in Training (PIT) permits before their rotations begin. These certificates are issued by the Texas Medical Board (TMB).

B. TMB has issued strict reporting requirements for PDs, which mandate that PDs submit, within 30 days of final action, information to TMB about PIT permit holders (residents), who receive adverse academic actions, are arrested for illegal activity or are fined for more than \$250. Adverse actions against residents who are not PIT holders do not need to be reported to TMB.

C. The following link describes TMB reporting requirements for PDs:
<http://www.tmb.state.tx.us/professionals/physicians/training/notification.php>
The following link describes TMB reporting requirements for PIT holders (Residents):
<http://www.tmb.state.tx.us/professionals/physicians/training/pit-reporting-duties.php>

D. State reporting requirements vary widely. SAUSHEC PDs are judged to have met these requirements by reporting adverse information to the Air Force Risk Management and Army Quality Management Office within required time intervals specified in this policy. PDs will report to state medical boards as described in paragraphs III.A. and III. B.

E. Many SAUSHEC PDs maintain active Texas medical licenses. To avoid being sanctioned by TMB for failing to report resident adverse actions or illegal activities, PDs must report adverse or illegal incidents in a timely manner. In addition, they must comply with Air Force and Army reporting requirements.

III. Policy: The Air Force and Army have established central control over release of adverse information about staff and resident physicians. Military services reporting to the National Practitioner Data Bank and to state medical licensing agencies follow different procedures from civilian organizations. Air Force and Army reporting procedures are not uniform. When SAUSHEC residents or fellows are placed in an adverse status (Probation, Extension in Training, or Termination), fail to report on time for GME training, are arrested for illegal activities or fined greater than \$250, PDs will follow one of the following procedures, **depending on the resident's sponsoring military service.**

A. Procedure for Reporting **Air Force** Residents:

1. Within 30 days of when the action becomes final, the PD will prepare the report and submit it to the Director of Medical Education (DME) for WHMC.
2. The DME will provide oversight and recommend necessary changes. Routing all reports through the DME Office provides the Service office a single point of contact in the event of questions.
3. The PD will submit the approved report to all involved state medical boards concurrent with submitting it to both the Air Force Medical Operations Agency (see paragraph IV. A) and the Air Force Personnel Command Physician Education Branch (see paragraph IV.
4. A copy of the final report will be provided to the DME.
5. This action will comply with federal regulations and state medical board requirements.

B. Procedure for Reporting **Army** Residents:

1. Within 10 days of when the action becomes final, the PD will prepare the report and submit it to the Director of Medical Education (DME) for BAMC.
2. The DME will provide oversight and recommend necessary changes. Routing all reports through the DME Office provides the Service office a single point of contact in the event of questions.
3. Within 15 days of the action becoming final, the PD will submit the DME-approved report to the Army Medical Command's Chief, Quality Management Division (see paragraph IV. C.). The Quality Management Division will quickly review the report, and then authorize the PD to submit the original report or an amended report to all involved state medical boards.
4. Copies of the final report will be provided to the DME and Quality Management Division.
5. This action will comply with federal regulations and state medical board requirements.

C. PDs will inform residents in writing, whenever adverse information is being submitted to the resident's military service point of contact or directly to a state medical board.

D. Residents should follow state medical board requirements for self reporting the precipitating event either before or concurrent with the PD's report.
