

Sleep Medicine Fellowship  
Supervision Policy  
Academic Year 2014-2015

**Job Description**

A Sleep Medicine fellow provides specialty care for patients referred to the San Antonio Military Health System's Sleep Disorders Center (SDC). Over the one year fellowship, the fellow's primary objective is to learn the specialty of sleep medicine. Upon graduation from fellowship, the trainee will be able to function as an independent staff specialist in sleep medicine, be eligible to take the board certification exam and will be able to function as a medical director of a sleep disorders center. This will be accomplished by:

1. Managing sleep medicine adults and children in the outpatient sleep clinic and inpatient consultation settings.
2. Mastering the skill of scoring and interpreting sleep medicine procedures.
3. Participating in educational activities to include case conference, core lecture series, and research conference and journal club.
4. Participating in the SDC's quality assurance and performance improvement programs.
5. Participating in the day to day operations of the SDC to include patient screening, patient and technician education programs and support staff management.

**Levels of Supervision**

Sleep medicine fellows are physicians that have successfully completed a residency. If not in subspecialty training, they would be practicing as an independent provider. Sleep medicine fellows do not perform invasive procedures.

All sleep medicine staff are appropriately credentialed and privileged to provide sleep medicine services and are ultimately responsible for the care of all sleep medicine patients. Sleep medicine staff are identifiable by reviewing the duty roster and by reviewing the electronic medical record for co-signature of encounters.

Direct supervision is not required during the sleep fellowship.

Indirect supervision with direct supervision immediately available is the level of supervision throughout the year of fellowship for clinic, sleep study interpretation and inpatient consultation.

Sleep medicine fellows perform home call and indirect supervision with direct supervision is available for questions that arise after typical duty hours.

Since the fellowship is a year long, progression of responsibility is assessed quarterly.

Clinic:

During the first quarter of fellowship, fellows present all patients to a staff before the patient leaves the clinic.

During the second and third quarter of fellowship, fellows present all new encounters to the staff before the patient leaves clinic. Established patients may be presented after the patient leaves clinic.

During the fourth quarter of fellowship, fellows may present new and established patients after the patient has left the clinic.

Inpatient consultations:

Throughout the year, the fellow may see and evaluate the patient prior to presentation to the sleep medicine staff, but the staff must see and evaluate all inpatient consultations.

Sleep study interpretation:

American Academy of Sleep Medicine accreditation standards requires a board certified/eligible provider attests to reviewing all the raw data of the study. Therefore all sleep study interpretations by the fellow are completely reviewed by the staff.

Sleep center management:

During the first quarter of fellowship, the fellows will observe staff management of consult referral distribution, patient education during group appointments and procedure protocol review.

During the second quarter of fellowship, the fellow will assume responsibility for patient education during group appointments and procedure protocol review. Staff will continue to manage consult referral distribution.

During the third and fourth quarters of fellowship, the fellow will assume responsibility for consult referral distribution, patient education during group appointments and procedure protocol review.

All sleep medicine fellow encounters require a co-signature by a sleep medicine staff. The level of supervision is documented in staff's comments.

Fellows will supervise residents and medical students throughout the year. All fellows however are equal in training and do not supervise each other.

The sleep medicine fellow must notify the sleep medicine staff if:

1. Disposition other than "without limitations" from clinic.
2. During call:
  - a. the fellow decides to go to the hospital to see and evaluate a patient.
  - b. a technician is required to call emergency services (911).

### **Transitions of Care**

Fellows are responsible for the continuity care of their outpatient panel. If a fellow is unavailable for patient care, then the fellow will establish and notify the medical clerks of the temporary surrogate provider.

For inpatient consultations, in addition to the note, the fellow will contact the ordering provider directly and verbally discuss the recommendations.

Sleep fellows do not have direct inpatient care responsibilities and therefore are not involved in hand-over processes.

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