

EXAMPLE LETTER: GME ADVERSE DISCIPLINARY ACTION (FORM B)

DATE:

TO: [Resident Name, PGY Level]

FROM: [Program Director Name, Title]

SUBJECT: Notification of Adverse Disciplinary Action

Failure to meet the performance standards of the program in any of the six ACGME Core Competencies for Graduate Medical Education can result in adverse disciplinary action with the potential for dismissal from the program. In your case, the [specify program training committee or process] has found you to be deficient in the following competency areas; therefore, you are being placed on [specify which disciplinary action: probation, extension of training, non-promotion; non-renewal of contract; dismissal].

The reasons for this disciplinary action by competency domain are:

1. Patient Care
2. Medical Knowledge
3. Interpersonal and Communication Skills
4. Practice-based Learning and Improvement
5. Systems-based Practice
6. Professionalism

You will have until [date] to correct these deficiencies.

The specific remedial steps that must be taken include:

The specific markers that will be used to determine if the appropriate remediation has occurred include:

Your faculty mentor during this period is [name]. He/she will be working with you on a regular basis throughout this remediation period.

The consequences of noncompliance or unsuccessful remediation are [specify which: suspension, non-promotion, non-renewal of contract, dismissal].

If remediation is successfully accomplished, the consequence for a recurrence of the same concerns will be:

Resident/Fellow

Date

Program Director

Date

I HAVE RECEIVED NOTIFICATION FROM THE DEPARTMENT OF _____ THAT I WILL BE PLACED ON THE ABOVE ADVERSE DISCIPLINARY ACTION EFFECTIVE [DATE]. I HAVE BEEN NOTIFIED OF MY RIGHT TO APPEAL THIS DECISION, AND HAVE BEEN PROVIDED WITH A COPY OF THE CURRENT GMEC DISCIPLINARY ACTION AND GRIEVANCE POLICY.

Resident/Fellow

Date

Program Director

Date