



M. Todd Rice <mtoddrice@gmail.com>

Fri, Mar 13, 5:43 AM (1 day ago)



I appreciate your time.

For all of the improvements pushed over the past decades, much of it is veneer in many programs. The ACGME is often a blank stamp of approval that lends credibility and program protection where it may not be due. Residents are still often indentured servants, working in excess of the promoted 80-hour weekly restriction, harassed, intimidated, fearful and retaliated against, but unable to truly complain. Suicide rates are high. They lie on surveys, because anonymity is never truly preserved and because if their program does face discipline or is shuttered, the resident is who will suffer. When the ACGME visits, residents are prepped with the "correct" answers and select residents are presented to the surveyors while others are hidden away. If residents do file a complaint with the ACGME, "we do not represent individual cases." If they complain to their institution, they become known, and harsh evaluations are requested of faculty by the program director or Clinical Competency Committee member that is most angered.

A case is built against them. Their subjective Milestone evaluations decline. Probation follows. Then termination. Due process is often merely a biased, foregone conclusion and formality with faculty, program directors and DIOs preserving their own relationships and status (if the resident is even aware that there is a due process available). They become blacklisted for training. Any program to which they may apply for transfer must contact their previous PD, with predictable results. A non-board certified physician is locked out of hospital and insurance company credentialing in the US - unemployable in clinical or academic medicine after high investments of years and debt. The power and financial differentials are immense and typically insurmountable. The resident is caught between the worlds of education and employment, with confidentiality and presumed faculty expertise used as shields against transparency and compliances.

The university and corporate sides of GME have likely had more than their share of representation and protection. If you'd ever like to help balance the scales of justice, I'd be pleased to recommend you to some of the victims I encounter.

Godspeed,

M. Todd Rice, MD, MBA

