OB/GYN CLERKSHIP
NYU LUTHERAN MEDICAL CENTER
150 - 55th Street
Brooklyn, New York 11220

MEDICAL STUDENT GUIDE

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Welcome to NYU Lutheran OB/GYN Clerkship, we are excited to have you!!!

**COURSE DESCRIPTION**

Obstetrics and Gynecology is a five to six week clinical clerkship offered during the medical student’s first clinical year of study. The goal of the clerkship is to acquaint the student with all aspects of medical care for women with emphasis on acquiring the basic skills of gynecologic and obstetrical history taking and physical examination, participating in and assuming responsibility for the evaluation and care of outpatients and inpatients, and acquiring practical experience in the operating and delivery rooms under the close supervision of staff. Formal and informal daily teaching sessions and rounds with the attending faculty and resident staff are part of the preceptor experience. The Clerkship Director meets with the students weekly for didactic instruction, evaluation and feedback. The students may be asked to present a case of the week, and each student will be required to make a presentation on an one of his/her write ups to his peers and a faculty mentor during the course of the clerkship. During the clerkship the student will keep a log of all patient encounters and procedures in which they observed or participated.

**COURSE OBJECTIVES**

The course objectives are designed to achieve the clinical competencies and objectives of the Department of Obstetrics and Gynecology of NYU Lutheran Medical Center. These objectives incorporate the educational objectives of a third year clinical clerkship as defined by the Association of Professors of Gynecology and Obstetrics.

By the completion of the clerkship in Obstetrics and Gynecology, the student will be able to:

1) Develop competence in the medical interview and physical examination of women, and incorporate ethical, social and diversity perspectives to provide culturally competent health care.
2) Apply recommended prevention strategies to women throughout the lifespan. T
3) Recognize his/her role as a leader and advocate for women.
4) Demonstrate knowledge of preconception care including the impact of genetics, medical conditions and environmental factors on maternal health and fetal development.
5) Explain the normal physiologic changes of pregnancy including interpretation of common diagnostic studies.
6) Describe common problems in obstetrics.
7) Demonstrate knowledge of intrapartum care of the mother and newborn.
8) Demonstrate knowledge of postpartum care.
9) Describe menstrual cycle physiology, discuss puberty and menopause and explain normal and abnormal bleeding.
10) Describe the etiology and evaluation of infertility.
11) Develop a thorough understanding of contraception, including sterilization and abortion.
12) Demonstrate knowledge of common benign gynecological conditions.
13) Formulate a differential diagnosis of the acute abdomen and chronic pelvic pain.
14) Describe common breast conditions and outline the evaluation of breast complaints.
15) Demonstrate knowledge of perioperative care and familiarity with gynecological procedures.
16) Describe gynecological malignancies including risk factors, signs and symptoms and initial evaluation.
17) Provide a preliminary assessment of patients with sexual concerns.
18) Understand the basic tenets and fundamental techniques utilized to evaluate, diagnose and treat the female patient osteopathically. (if applicable)

**ORIENTATION**

Students will start their rotation by reporting to Ms. Calderon, the Medical Student Coordinator. She is located on the third floor in the Executive Department. Once a medical student is processed, and (s)he is issued an ID card. The Administrative Coordinator will welcome and orient the medical student. There will also be a brief orientation with the Clerkship Director or the Resident Liaison. After this orientation, (s)he will be assigned to one of the rotations.

- Arrangements will be made for distribution of surgical scrub suits, white coats, and a key for the Conference Room and Locker Room doors (key number 7094). Only hospital scrubs may be worn during the rotation.
- If this is the first surgical rotation for the medical student, arrangements will be made for instruction in scrubbing and in sterile technique in the Operating Room.
- After this orientation, (s)he will be assigned to one of the rotations. The chief-resident for that rotation will give the medical student his/her daily assignments.

**HOW TO PAGE**

- From inside the hospital: Dial *621 or 8700 – wait for prompt – input pager number – wait for prompt – input extension
- From outside the hospital: Dial 718-630-8700 – wait for prompt – input pager number – wait for prompt – input telephone number

**HOURS**

- The day shift begins at 6:00am. Students should go to Labor & Delivery to review any scheduled cases for the day followed by morning report in the Ob/Gyn conference room at 7:00am. All schedules are posted including the latest lecture schedule on the lutheranmeded.com website.
ON-CALL SCHEDULE

- There is a “night float” system Mon – Fri.
- Night Float goes from 6:00pm – 6:00am
- There is a weekend call schedule which is from 7:00am – 7:00pm or 7:00pm – 7:00am. If you are on call on Sunday and leave the hospital at 8:00am on Monday and return on Tuesday at 6:00am for your scheduled rotation. Students will be expected to be present for their assigned shift. Should there be extraneous circumstances, please notify Labor and Delivery immediately (718-6307525) and email Dr. Faris at Basma.Faris@nyumc.org. Because much of the clinical activity in OB/GYN occurs at night, students are expected to remain on site at the hospital when on call. When on call and not otherwise occupied, students are encouraged to become involved in cases managed by residents or other private physicians. Students are given time off to rest and study after they have spent a night on the hospital.

GYNECOLOGY ROTATION

- **Expectations:** Daily morning report, active involvement with the resident team, ER consults, and surgical cases. Daily rounding with progress notes, discharge planning, follow up care.
- Students should meet with the GYN Chief before morning report to be assigned to specific operative cases. Please write down: Time of Procedure / OR Room / Procedure / Attending / Resident
- Students must have had formal Scrubbing Technique class prior to scrubbing in the Operating Room
- GYN service medical students should be familiar with all the in house admitted patients, as well as the postop patients. Daily rounding must be done on any case you scrubbed in on or consulted upon.
- The students will be expected to write daily progress notes, in the traditional SOAP note format, on any patients in house that they have scrubbed in on or been a part of their care. These notes must be evaluated, attended and cosigned by a resident/ or attending
- Medical Students should use any “down” time to prepare for his/her case. (S)He should be familiar with the patient’s history, physical exam, lab and radiology studies, and the procedure.
- The Students are also expected to complete the APGO gynecologic questions during this part of their rotation
- The student should be available to help prepare the patient and the room, before the start of the procedure.
- (S)He should show his/her ID badge to the circulating nurse. She will record his/her name in the operative notes.
- The student will help the resident and the anesthesiologist, transport the patient into the recovery room.
- Medical students will also go with the resident to see GYN admissions, ED consults and floor consults, as well as GYN ONC clinic.
- The GYN chief resident will dismiss the students.
LABOR AND DELIVERY ROTATION

- **Expectations:** Medical students on the OB rotation should be present at the board rounds and morning report. All students will be expected to work in pairs with the residents. After morning report, the students should meet with the chief resident or attendings, and assignments to be made. If you are not assigned to a patient, **PLEASE ASK ONE OF THE RESIDENTS for an appropriate patient.** All deliveries must be attended to by a medical student, with the exception of private patients and/or gender preferred patients. If you have any questions feel free to ask the covering attending. An OB/GYN labor floor is very busy, with dynamic changes. We encourage the students to be proactive otherwise opportunities for learning can be easily lost.

- The medical students assigned to L&D should report to the chief resident of OB
- The student should introduce himself to the residents, nurses and the rest of the staff
- While on L&D the medical student should display the utmost discretion and caliber of conduct at all times
- There is no eating or drinking at the L&D nursing station
- The student will be assisting on C/S, normal vaginal deliveries and other obstetrical procedures.
- (S)He will be involved in the triage, admitting and management of obstetrical patients, and admitted antepartum patients.
- The students will be learning how to draw blood and to start IVs
- The student will be learning normal and abnormal labor, electronic fetal heart tracing interpretations, and management of pre-term labor
- If deemed safe and appropriate, the medical student may be able to perform a vaginal delivery.
- Ob students will round on post-partum patients with the Ob team prior to morning report.
- Downtime should be spent reading and performing APGO questions
- While on the Obstetrical Rotation, the students will take turns participating in the MFM department. These activities include Amniocentesis in the MFM unit and Participation in the High Risk Clinic (Wed. 9-12, 1-4)

OUTPATIENT(CLINIC) ROTATION

**Expectations:** Medical students assigned to the clinic are expected to be timely and professional. You will work closely with the faculty preceptor to gain education on Women’s Preventative Health, Prenatal Care, Family Planning/Contraception, STI care in addition to numerous other gynecologic care topics. Please read outpatient topics as well as work on the APGO outpatient questions during this block. All students attend Morning Report and designated lectures as well as attending their respective clinics
Clinical rotations mirror the preceptor you are assigned to. Medical students will have a daily schedule and preceptor depending on the outpatient site. The hours are delineated in the schedule. Please do not change preceptors.

While on the Clinical Rotation, the students will take turns participating in the MFM unit and participation in the High Risk Clinic.

- While on the MFM unit or in clinic, medical students must:
  i. Be aware of basic HIPPA regulations.
  ii. Proper attire, including jackets and ID’s.
  iii. Identify themselves to the clerical staff, to the MFM attending (if available) and to the Head Technologist (if available) upon entering the unit.
  iv. Be aware that examination rooms are not to be entered, unless the student is accompanied by an attending, a resident or one of the office staff.

**ASK-ME Rotation**

This rotation is two weeks of organized Preceptor directed and self directed learning created by SGU to better prepare students for the NBME and the USMLE licensing examinations. This is a recent addition to the clerkship curriculum. There is a specific schedule of organized learning activities In order to take the oral examination the activities detailed must be completed. Please refer to the organized schedule on the LutheranMedEd.com website .Although this rotation was created by SGU for their students any of the other students may take part in the organized learning activities when and may also take part in the modules. At the end of the clerkship all students must have completed the 7 APGO interactive modules and must submit their performance on the APGO 100 question-comprehensive examination & both 50 question exams.

**TEACHING AND LEARNING METHODS**

The OB/GYN clerkship at NYU Lutheran takes advantage of our robust and diverse outpatient health center network. It is designed to provide the student with an appreciation of what a practicing community obstetrician-gynecologist does, both in out-patient settings and at the hospital. The student makes hospital rounds with the faculty member and scrubs in on scheduled surgeries and emergency surgeries or deliveries that occur during the student’s assigned hours. The student is to keep a log of all patient encounters which will be reviewed biweekly by their mentor to ensure that the student experiences a variety of cases.

Where available, the students will work with an OB/GYN sub-specialist in Maternal-Fetal Medicine, Reproductive Endocrinology, GYN Oncology or Uro-gynecology for one day during the rotation. The student will be expected to attend OB/GYN conferences that might be given at the hospital.

The student will be excused for one half day per week to attend NYU Lutheran Medical Center’s OB/GYN resident grand rounds and resident didactics. Students will meet with the clerkship director one on one at least once during the rotation. During this meeting current readings will be discussed, case logs reviewed and students’ assigned topics presented. This also offers the students an opportunity to discuss their experiences and to adjust assignments to meet the educational objectives.
DRESS/PROFESSIONALISM

- Medical Students are required to act courteous and professionally at all times
- Medical Students are required to protect patients confidentiality at all times
- At no times should there be any discussions of patients in common areas, elevators, in the cafeteria and outside the hospital.
- Medical Students should be familiar with the HIPPA laws
- ID cards should be visible at all times
- Scrub suits are not allowed out of the Hospital. Students will commute with appropriate clothing, and put scrubs on in the locker room.
- When wearing Scrub suits in the hospital, they must be covered at all times with a white lab coat (not a sweater or sweatshirt)
- Any shirt worn underneath the scrub top must have sleeves that are shorter than the scrub top
- Clothing should be professional and appropriate. If not, you will be sent home.

Grading policy

All final grades will be comprised of 60% clinical performance, 20% oral examination, and 20% written examination. Clinical performance will be based on patient logs, 1 clinical write ups and 1 faculty and 1 resident evaluation. Regular meetings with the clerkship director can address any concerns in clinical volume and in regards to the write-ups. In addition all students must complete the 580 questions on the APGO (Association of Professors in Obstetrics and Gynecology) as pass the 100 question comprehensive quiz to be able to take the oral examination and pass the rotation. Instructions for this are on the LutheranMedEd.com website.

STUDENT RESPONSIBILITIES

Medical Students rotating at NYU Lutheran Medical Center are ambassadors of their school, and are expected to conduct themselves at all times in a professional manner that reflects honorably on the tradition of the school and the future medical profession they are about to enter. It is a privilege to be allowed by respected physicians in our community to participate in the care of their patients who, in turn, have entrusted their care to those physicians.

1 – Always be on time for all scheduled appointments including lectures, rounds, surgery, office visits, and patient visits. Your tardiness effects many people and is unprofessional.

2 – Dress professionally. A clean white lab jacket is mandatory. Men should wear a shirt and tie, and women should dress modestly. Sandals and open-toed shoes are not appropriate. Scrubs should only be worn in the operating room, labor & delivery suite or when on call.

3 – Leave pager and cell phone numbers with all parties who may need to reach you.

4 – Contact your preceptor during your orientation week for instructions on beginning your clinical work.

Revised: 11/30/15
5 – At all times behave courteously to all hospital and office personnel. They will your best allies now and in your future practices.

6 – Do not be afraid to admit your ignorance, and never perform a procedure you do not feel competent with unless under direct supervision. First do no harm.

7 – Complete your clerkship evaluations & hand in at your final exam.

8- All students from all schools get one extra day to study for your shelf exam, however this day is only free of clinical responsibility. Scheduled lectures are still mandatory attendance.

9- Scheduled lectures are MANDATORY. Unless a student is on night float, the lectures must be attended. They are for your educational benefit, and much time and effort has been put into creating these lectures. The schedule does change frequently based on attending availability, therefore please check the lutheranmeded.com website for the latest day to day lecture schedule.

10- Students that are sick or unable to attend need to submit documentation to the Clerkship Administrator. As of 11/10/2014 any student needing to miss the rotation for illness purposes for more than one day, will need to submit a physician’s note.

11- In terms of missing days for the CS/CK exam- please submit the request at the beginning of the rotation and you will be allowed 2 days for this absence, travel etc.

**Minimum Required Cases for Obstetrics and Gynecology**

The cases represent the minimum number of patients to be evaluated by each student to ensure ample experience across the usual scope of practice for obstetrics and gynecology, balancing a busy workload that is not too oppressive.

- Abnormal Pap smear - 2
- Antepartum examination and care – 3
- First Trimester Complications (pain or bleeding) - 3
- Normal Labor and Delivery – 3
- Postpartum examination and care – 3
- Vaginal discharge – 3
- Abdominal pain – in pregnancy – 2
- Breast exam (performed/assisted) – 1
- Abnormal Vaginal bleeding – non-pregnant – 2
- Pelvic pain - 1
- Abnormal Pap smear -2
- Ectopic pregnancy-1
- Pelvic pain – 1
- Third Trimester Complications (pain or bleeding) – 1
- Abortion (spontaneous – threatened – incomplete – missed) – 1
- Family Planning -2
- Diabetes mellitus in pregnancy – 1

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Abnormal uterine bleeding - 2
Hypertension in pregnancy – 2
Menopause – 2
Sexually transmitted disease (STD) – 1
Uterine diseases & neoplasm/ovarian – 2
Cervical disease & neoplasm – 1
Infection in pregnancy (includes endometritis) – 1

Appropriate exposure to diverse kinds of patients is assured by scheduling patients specifically for student encounters and monitoring the cases seen on a weekly basis. If it becomes apparent that a student has not seen the required cases, the student may be assigned to additional faculty or other learning experiences may be substituted.

**TEXTBOOKS AND OTHER LEARNING RESOURCES**

**REQUIRED:**

**Obstetrics and Gynecology, 6th Edition** (Beckmann, Ling, Barzansky)
Lippincott Williams and Wilkins, Baltimore and Philadelphia, 2009

Suggested reading for reports, in depth coverage of topics encountered, and for those students wishing to pursue a career in OB/GYN:

Williams Obstetrics. (Cunningham, MacDonald, Gant, Leveno, Gilstrap)

Obstetrics Normal and Problem Pregnancies. (Gabbe, Niebyl, Simpson)

Novak’s Textbook of Gynecology. (Novak, Jones and Jones)

Comprehensive Gynecology. (Droegemueller, Herbst, Mishell & Stenchever)

Clinical Gynecologic Oncology. (DiSaia and Creasman)

Te Lind e’s Operative Gynecology. (Mattingly)

Clinical Gynecologic Endocrinology and Infertility. 7th Edition (Speroff and Fritz)
Lippincott Williams and Wilkins, Baltimore & Philadelphia, 2005

**OB-GYN 101**
**UpToDateOnline.com**
**Blueprints for OB/GYN**
**First Aid for Ob/GYN**

**Self Study Reading Program**

This self study program has been designed to assist students in managing the vast...
amount of information in ob/gyn, particularly that for which they will be held responsible on National Board Examinations. Students may design their own reading programs, but adherence to this one will provide an organized exposure to the core concepts of the third-year clerkship. The material is divided into general topics with chapters from the Beckmann textbook assigned at about one per day. Each chapter provides a concise summary of an important aspect of the specialty, and concludes with an illustrative case study and review questions. Students are encouraged to read chapters out of this sequence as they encounter specific clinical scenarios. Because the chapters are so brief, students are expected to use other resources to supplement their understanding of appropriate cases that they encounter clinically. Students should be prepared to discuss assigned reading at their weekly meetings with the Clerkship Director.

**Week One – Orientation to Obstetrics & Gynecology**

Chapter 1 – Health Care for Women  
Chapter 2 – Ethics in Obstetrics & Gynecology  
Chapter 3 – Embryology, Anatomy, & Reproductive Genetics  
Chapter 4 – Maternal-Fetal Physiology  
Chapter 33 – Gynecologic Procedures  
Chapter 34 – Reproductive Cycle  
Chapter 48 – Human Sexuality  
Chapter 49 – Sexual Assault & Domestic Violence

**Week Two – Essentials of Obstetrics**

Chapter 5 – Antepartum Care  
Chapter 14 – Abortion  
Chapter 6 – Intrapartum Care  
Chapter 7 – Abnormal Labor  
Chapter 8 – Intrapartum Care  
Chapter 9 – Immediate Care of the Newborn  
Chapter 10 – Postpartum Care  
Chapter 12 – Postpartum Hemorrhage  
Chapter 13 – Postpartum Infections  
Chapter 24 – Obstetric Procedures

**Week Three – Complicated Obstetrics**

Chapter 11 – Isoimmunization  
Chapter 16 – Medical & Surgical Conditions of Pregnancy  
Chapter 17 – Hypertension in Pregnancy  
Chapter 18 – Multifetal Gestation  
Chapter 19 – Fetal Growth Abnormalities  
Chapter 20 – Third Trimester Bleeding  
Chapter 21 – Post-term Pregnancy  
Chapter 22 – Preterm Labor  
Chapter 23 – Premature Rupture of Membranes

**Week Four – Essentials of Gynecology**

Chapter 15 – Ectopic Pregnancy  
Chapter 25 – Contraception
Chapter 26 – Sterilization  
Chapter 27 – Vulvitis and Vaginitis  
Chapter 28 – Sexually Transmitted Disease  
Chapter 29 – Pelvic Relaxation. Urinary  
Incontinence, & Urinary Tract Infections  
Chapter 30 – Endometriosis  
Chapter 31 – Dysmenorrhea and Pelvic Pain  
Chapter 32 – Disorders of the Breast

Week Five – Reproductive Endocrinology & Infertility  
Chapter 35 – Puberty  
Chapter 36 – Amenorrhea & Dysfunctional Uterine Bleeding  
Chapter 37 – Hirsutism & Virilization  
Chapter 38 – Menopause  
Chapter 39 – Infertility  
Chapter 40 – Premenstrual Syndrome

Week Six – Gynecologic Oncology  
Chapter 41 – Cell Biology & Principles of Cancer Therapy  
Chapter 42 – Gestational Trophoblastic Disease  
Chapter 43 – Vulvar & Vaginal Disease & Neoplasia  
Chapter 44 – Cervical Neoplasia & Carcinoma  
Chapter 45 – Uterine Leiomyoma & Neoplasia  
Chapter 46 – Endometrial Hyperplasia & Cancer  
Chapter 47 – Ovarian & Adnexal Disease

**ORAL EXAMINATIONS**

- Each medical student at the end of the rotation will have a 20 minute faculty observed clinical examination with Dr. Faris as 20% of your overall grade.

**EXIT EVALUATIONS**

The medical student should have the following items upon presenting for the oral examination.

1. **Case logs** of all the obstetrical and gynecology patients encountered on the rotation. Please use your school logs, should be neatly completed. A copy should be made for your records in that these case logs will be collected at the time of your oral examination. If your school requires case logs these may not be sufficient. Please inquire.

2. **One Write-Up**
   a. Patient write ups should be type written and include the following:
      i. Complete history and physical of the patient
      ii. Diagnostic work done
      iii. Assessment and diagnosis
      iv. Plan or procedure done
      v. Discussion of the diagnosis (½ to 1 page)

3. **Evaluations**: at least 2 evaluations, 1 resident evaluation and 1 attending
evaluation.
4. **APGO examination**- Passing score on the 100 question comprehensive exam & both 50 question exams
APPENDIX

1. Student log sheet  
2. Student contact information  
3. Preceptor contact information  
4. Faculty evaluation form  
5. Resident evaluation form  
6. Oral exam Topic Criteria  
7. Sample write up  
8. Assignments and On Call Schedule  
9. Lecture Schedule
Subject: Appropriate Dress

Policy:

The purpose of this policy is to ensure that as employees of NYU Lutheran Medical Center we present an image of trust and confidence to the public. Appearance plays an important role in fostering this feeling.

Therefore, all employees are expected to be appropriately dressed according to Medical Center standards while on duty for the prevention of infection, promotion of safety and perception of the Medical Center by patients and visitors. While at work employees are expected to be neat, clean and presentable whether in uniform or street clothes. Some clothing which is appropriate for social occasions, parties or recreation is not suitable in the Medical Center.

It is essential that the following policy be enforced in a fair and consistent manner throughout the Medical Center. The enforcement of this policy is the responsibility of all supervisory and managerial staff; where there is a need to interpret this policy, it is the responsibility of the Human Resources Department.

Attire shall be consistent with the professional environment and image of a Medical Center.

Certain types of clothing such as jeans, leggings, stretch pants, see-through clothing, beachwear, sweatshirts or sweatpants, shorts, tank tops, T-shirts, bare midriffs or extreme form fitting and revealing fashions are not acceptable. This list is not meant to be all-inclusive. There may be other requirements depending on the Department and the Job Category of the employee. In addition, due to the nature of certain jobs, more restrictive dress codes may be required.

Any hospital employee who has direct patient contact (see administrative policy), who handles food, medications, blood or body fluids may not wear artificial nails, extenders, wraps and decals. All hospital employees’ hands and nails should be clean, tidy and free of chipped or peeling nail polish. Natural nail tips must be kept less than a ¼ inch long.
Where an employee’s work requires that they walk and/or stand for prolonged periods of time, and where safety is not an issue, employees may be permitted to wear low cut sneakers (high top sneakers are not permitted). Sneakers may not be worn with business attire or in public or office areas. In areas where sneakers may be worn, they must be clean and properly laced. In certain areas of work, for safety and sanitary reasons, open-toe shoes, clogs or similar casual shoes are not permitted. Socks or stockings must be worn at all times while at work.

Those employees who wear uniforms are responsible to make sure that they are neat and clean. Departments may have developed specific guidelines for uniforms and in such instances, they should be enforced in conjunction with the Medical Center wide policy.

Hats, caps and other head coverings are not to be worn at work unless they are being worn as a part of a uniform, for religious reasons or for health or safety reasons in the performance of the employee’s job duties. Where hats or other head coverings are part of an employee’s uniform, they are to be worn in the manner in which they were designed. Wearing authorized head coverings in any other way, even when not working, is not appropriate.

Scrub suits and dresses worn in sterile areas should not be worn outside these areas unless properly covered with a lab coat. House staff, nursing staff, or other employees who are not required to wear scrub outfits are not to wear them in lieu of their normal professional attire. Employees are not to wear their scrub suits outside of the Medical Center and are required to change into other clothes if they are leaving the building. If a scrub suit that has been issued by the Medical Center is lost, the Medical Center will require that the employee pay to replace the scrub suit.

Shoe covers, caps and masks should be removed before going into general patient care or public areas of the hospital and placed in the appropriate receptacle for disposal.

Every employee must wear a validated identification badge with his/her photograph prominently displayed at all times.
Procedure:

An employee who, in accordance with the above stated policy, is considered inappropriately dressed by the Department Head/Manager shall be advised and may be sent home to change into appropriate attire. This decision should be made at the earliest possible time during the shift.

On the first occurrence, the employee should be advised that if he/she arrives at work inappropriately dressed again, he/she will be sent home to change and the time away from work will not be paid. In certain instances, where the employee is dressed in such a manner where allowing them to continue to be at work would be considered inappropriate, the employee should be sent home immediately and not be paid for lost time.

Employees who arrive at work inappropriately dressed on a second or subsequent occasion are to be issued a written warning notice and are to be sent home to change clothing. Employees sent home should not be paid for lost time.

Employees who do not comply with this policy are subject to progressive corrective action up to and including discharge.