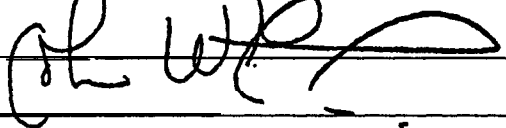


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	EFFECTIVE DATE: 10/28/98	REVISION NO:
SUBJECT: PHYSICIAN IMPAIRMENT	FUNCTION: RESIDENT TRAINING PROGRAMS	
APPROVALS: Final - Executive Vice President & Chief Operating Officer  Concurrences: _____		

1. **Purpose**

The University of Maryland Medical Center (UMMC) strives to maintain a drug free workplace. The UMMC program is sensitive to the societal issue of drug and alcohol abuse. Addiction is recognized as a chronic medical problem. Notwithstanding the desire to address the individual needs of the resident, the Medical Center's primary consideration is the safety of patients, whose care may be compromised, and of co-workers who may be endangered by individuals whose performance may be impaired due to drug and/or alcohol abuse. This policy outlines the key provisions of the program to achieve and maintain a drug free workplace.

2. **Scope**

This policy applies to all residents participating in training programs that the University of Maryland Medical Center (UMMC) sponsors.

3. **Responsibility**

It is the responsibility of all residents to maintain a drug free workplace by personally refraining from the abuse of drugs and/or alcohol, and reporting those co-workers who are suspected of suffering from addiction. It is the responsibility of the residency training program directors and clinical chiefs to communicate this policy to their residents and to enforce its provisions through referral to the Employee Assistance Program and, if necessary, corrective discipline.

4. **Procedure**

4.1 Residents Drug Testing

After the resident match, but before the resident begins working, the resident will be required to have a pre-employment physical which includes testing for illegal drugs (see policy #110, titled "Employee Health Services Pre-employment Physical"). If the resident tests positive for any drug listed in UMMC policy #1 10, they must relinquish their position on the UMMC housestaff.

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4.2 Fitness for Duty

After the resident starts working, if he/she exhibits signs of drug and/or alcohol impairment, the program director or department chief will refer the employee to the Employee Assistance Program (EAP). Specific procedures for this referral can be found in the Fitness for Duty Policy (see policy #508).

4.3 Professional Assistance Committee (PAC)

The PAC assists residents who may become impaired because of drug and/or alcohol abuse, emotional distress, or physical ability. The PAC's work is confidential and it has no disciplinary authority. The PAC's services are free to the resident.

4.3.1 Residents access the services of the Professional Assistance Committee (PAC):

- 4.3.1.1 through self-referral, i.e. directly calling the committee's chairman;
- 4.3.1.2 by receiving a referral through the EAP (see policy #514, titled Employee Assistance Program).

4.3.2 The role of the PAC is to:

- 4.3.2.1 assess the resident's needs;
- 4.3.2.2 refer the resident for the appropriate treatment;
- 4.3.2.3 provide a liaison with groups, such as the Med Chi Physician Rehabilitation Program;
- 4.3.2.4 monitor and document recovery; and
- 4.3.2.5 provide education to physician, resident and community groups in partnership with other organizations.

4.4 Corrective Discipline

Nothing in this policy restricts the program director or department/division chair from using corrective discipline to address the specific performance issues of the employee who may be undergoing counseling for drug and/or alcohol addiction, as long as the discipline is for performance related issues and not for drug addiction.