

I. POLICY STATEMENT

The University of Florida (UF) College of Medicine is committed to the provision of public safety. Physician impairment has the potential to cause patient harm. Individuals concerned that a resident or fellow may be suffering from impairment are obligated to report such problems.

II. REASON FOR POLICY

The Accreditation Council for Graduate Medical Education (ACGME) requires the sponsoring institution maintain a policy to address physician impairment.

III. SCOPE

This policy applies to all residents and fellows (hereinafter "Housestaff") in training programs accredited by the Accreditation Council for Graduate Medical Education (ACGME), or approved by the American Board of Medical Specialties (ABMS), and/or sponsored by the UF College of Medicine.

IV. DEFINITION OF TERMS

- a. Physician impairment - any physical, mental or behavioral disorder that interferes with the ability to engage safely in professional activities (from AMA, accessed 11/22/2022: H-95.955 Physician Impairment | AMA (ama-assn.org)H-95.955 Physician Impairment | AMA (ama-assn.org)
- b. Professionals Resource Network (PRN) – one of two programs designated as the State of Florida's Impaired Practitioners Programs. PRN works closely with the Florida Department of Health in regard to the impairment of physicians.
- c. UF Employee Assistance Program (EAP) – confidential resource for mental health services.

V. PROCEDURES

- a) Faculty, staff, peers or other individuals who suspect a Housestaff may be impaired are obligated to report their concern.

- b) Individuals may report these concerns to the Program Director, Department Chair or the Designated Institutional Official. Concerns may also be reported directly to PRN [Make a Referral \(flprn.org\)](http://flprn.org).
 - a. Housestaff are encouraged to self-report in the same way.
- c) If there is concern regarding patient safety, the Housestaff should be immediately removed from the clinical setting and placed on paid administrative leave.
- d) Housestaff are required to submit to reasonable suspicion drug and/or alcohol testing.
- e) Resumption of patient care and residency program activities may be contingent upon approval by PRN or EAP and continued compliance with treatment.
- f) Programs may refer the Housestaff for a fitness for duty assessment before return to work is granted.

Approved by GMEC, 02/09/2023; replaces previous policy last reviewed April 2018