

Procedure “Sign-Off” Form

# Resident’s Attestation:

Procedure Requested

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Anoscopy

Arterial Catheter Placement

Central Venous Catheter – Femoral Central Venous Catheter – Internal Jugular Central Venous Catheter – Subclavian Chest Tube Placement

Endotracheal Intubation, Video Laryngoscopy Joint Injection

Lumbar Puncture – Adult Lumbar Puncture – Pediatric Paracentesis

PICC line placement

* I have performed the requested procedure at least 3 times (minimum 5 if endotracheal intubation with video laryngoscopy) under direct supervision and feel comfortable performing the procedure without direct supervision.

**Name: Signature: Date: / /**

# Supervisor’s attestation:

* I directly observed this resident perform the procedure indicated. The resident appropriately named risks & benefits, obtained informed consent, observed a procedural time-out, prepared and maintained an appropriate sterile field, performed the procedure appropriately

Procedure Rules for Residents

Procedures not listed above always require direct supervision by a credentialed attending physician.

Once this form has been submitted, the resident may perform the specified procedure under indirect supervision and provide direct supervision of the procedure to other residents.

When performing a procedure under indirect supervision, the resident must verify with a credentialed attending that the procedure is indicated prior to performing the procedure.

Residents in their first 12 months of training must have every procedure supervised directly, even after completion of this form.

If an attending is available to supervise a procedure, the resident should invite them to do so for purposes of teaching and billing, even if indirect supervision is allowed.

without intervention from me, and provided appropriate aftercare and post-procedure monitoring.

* The resident is competent to perform this procedure without direct supervision.

**Name: Signature:**

**Date:**

**Additional Comments:**

Please Fax Completed Form to the Office of Medical Education: (805) 652-6606