**Orientation**

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Introduction

Just when you take a break from resident recruitment and match your ideal intern class, you now start the process of orientation. It is important for this process to be streamlined and organized as it will make for a smooth transition when the new class starts. The core areas of orientation include post-match communication, institutional onboarding, program-specific onboarding, and event planning.

Post Match Communication

Both program directors and residents are encouraged to reach out to the new intern class. The program director may give each candidate a welcome via phone or choose to communicate via electronic mail very soon after the match results. We also recommend that residents also reach out to the future interns, a peer to peer welcome. One such example is a deliberate grouping of residents into resident “families,” essentially creating a small peer support group. These families include a “Grand big (PGY3),” “Big sib (PGY2)” and the new intern. On Match Day, interns can be chosen for each family and the resident family can reach out to the intern to not only congratulate them but exchange contact information for questions that the new intern may have as they embark on this new chapter. In smaller programs, the rising Chief resident plays a key role in communicating with the intern class, connecting them to one another and the senior residents.

Institutional Onboarding

Although institutional onboarding will vary per organization, there are basic tenants that should be met. Those include introductory classes on the electronic medical record utilized in the inpatient and outpatient settings and a discussion of the role of human resources departments, particularly the access and availability of the institution’s peer support and well-being resources. The institution should specifically address employee wellness resources, employee, and family assistance programs such as access to counseling and mental health supports. Interns should also be introduced to institutional resources, leaders and offices including quality and safety, pharmacy, compliance, diversity, and ethics.

Program-Specific Onboarding

The details of program specific onboarding will also vary per program. Most interns start orientation 1-2 weeks before their clinical responsibilities begin, and the length of orientation may be determined by your institution, union contracts, and/or pay structures. Within this period, they are introduced to program leadership, core faculty and current residents during various social and educational events. Program orientation should include a tour of clinical and educational facilities, a clear outline of work and behavior standards, individual and class schedule expectations, required educational curricula and various trainings such as life support classes.

Some programs hold an intern “Boot Camp” during orientation, with the aim of refreshing key clinical concepts, engaging as a team and decreasing the anxiety that inevitably accompanies the transition to residency. A sample “Boot Camp” schedule:

|  |  |  |
| --- | --- | --- |
| Day 1 | Day 2 | Day 3 |
| Dept Orientation   * “Top 10: How to succeed in our residency” * Technology (scheduling software, logs) * Advisors and Mentors | Nuts & Bolts of continuity clinic | Intro to Family Centered Rounds |
| Scavenger Hunt (facilitated tour) | Telehealth | Fluid Management |
|  | Primary Care Q & A | Inpatient Q &A |
| Lunch | Lunch | Lunch |
|  | Sim Center  Case 1: Depressed Teen  Case 2: Febrile infant  Procedure Practice: IV, LP, BMV, Intubation | Sim Center  Case 1: Hypovolemic shock/Fever Neutropenia  Case 2: Respiratory Distress  Case 3: Family Centered Rounding |
| Welcome Picnic: Faculty, residents, Chair |  | Intern dinner event: Chair, PDs |

Small, pocket sized, “Pediatric Housestaff Handbooks,” created by faculty and residents curated and reviewed annually for any updates are another common resource provided for the intern class. This can hold important phone numbers, clinical algorithms, and maps of referral area, for example.

A sample intern onboarding checklist:

Sample Pediatric Residency Program Intern Onboarding Checklist

|  |  |  |  |
| --- | --- | --- | --- |
| **Task** | **Yes** | **Date** | **Who? /Notes** |
| After MATCH: PD, APD, Coordinator, rising Chiefs and/or residents call and welcome new interns. Coordinator sends follow-up email with contact info and expectations of when they will receive next wave of information. **Communication is key!!** |  |  |  |
| GME sends first wave of emails regarding contracts and medical licenses. |  |  |  |
| Program email sent regarding schedules, advisor assignment, and continuity clinic team |  |  |  |
| Identification of faculty advisors for residents, assignment of continuity clinics |  |  |  |
| GME processes human resources’ onboarding resulting in institutional identification number |  |  |  |
| Program places onboarding ticket to information technology |  |  |  |
| Order cell phones, pagers, and pediatric handbooks once residents are in the system |  |  |  |
| Place tech tickets for communication devices, EMR, laptops |  |  |  |
| Take headshots. Place a tech ticket for ID badges-Enter residents name |  |  |  |
| Order new PALS/BLS/NRP books for orientation |  |  |  |
| Order in-training examinations |  |  |  |
| Reserve labs for in-training examinations, electronic medical record training |  |  | . |
| Renew Primary Care Modules/Add interns |  |  |  |
| Renew AAP membership/Add interns |  |  |  |
| Renew ABP Question Bank/Add interns |  |  |  |
| Collect-   * External rotation paperwork * Driver’s License * Vaccine record * Social security number * Home address * Personal phone number * Emergency contact numbers |  |  |  |
| Book event for intern welcome by leadership team |  |  |  |
| Book events for welcome by residency classes and faculty |  |  |  |

Event Planning

There are various events that can be planned for a new intern class during the orientation period. One suggestion at the institutional level is a welcome reception hosted by the institution’s leadership including the DIO, the program director and associate program directors, and the Chair of Pediatrics. Other possibilities include a long white coat ceremony in which each intern has their personalized long coat with hospital emblem placed on their shoulders as the program director reads each interns’ biography. If held in an auditorium venue, the long white coat ceremony can serve to introduce the new interns to the larger medical family they are joining. We also recommend having several casual social events during orientation where the new intern class can meet and begin their enduring friendships with the chief residents, senior pediatric residents, pediatric subspecialty fellows and entire faculty community.

Resources

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