

YOUR ADVENTURE BEGINS



Carolina's HealthCare System
Blue Ridge

CAROLINAS HEALTHCARE SYSTEM BLUE RIDGE

2019 By the Numbers

315



Licensed Inpatient Beds

9,174



Surgeries/Endoscopies

2,005



Employees

31,967



Oncology Visits

253



Medical Staff Providers

860



Babies Delivered

415



Nurses

50,143



ED Visits

45



Nurse Advanced
Practice Providers (NP,
CNM, CRNA, CNS)

11,078



Admissions



\$4,394,993

Each day in uncompensated care and
other benefits to our community in 2019

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Burke County's Top 5

1. Natural Beauty

Waterfalls, trails for hiking, camping, cycling and horseback riding, Blue Ridge Parkway, South Mountain State Park, Lake James State Park, Linville Gorge (the "Grand Canyon of the East"), Pisgah National Forest, Catawba River, Linville River, and Wilson Creek.

2. Entertainment

Free summer weekend concerts on the courthouse square; state-of-the-art cinema complex in Morganton; City of Morganton Municipal Auditorium and the Old Rock School in Valdese; coffee shop and intimate concerts, annual festivals and special events year-round.

3. The Arts

Lively and growing arts community (painters, sculptors, ironwork, glassworks and more) with shows at the Burke Arts Gallery, Old Rock School and private artists' galleries.

4. Dining

Fresh foods from area farms to national restaurant and fast food chains; boutique wineries, micro-breweries, and distilleries gaining regional and national reputations.

5. Excellent Medical Care

Carolinas HealthCare System Blue Ridge!



Your Adventure Awaits

Come to the Beautiful Mountains of Western North Carolina

Carolinas HealthCare System Blue Ridge is located in the foothills of the beautiful Blue Ridge Mountains of North Carolina.

This area offers a wonderful quality of life for you and your family. Golf, tennis, hunting, fishing, skiing, hiking, the Blue Ridge Parkway, excellent schools and stable housing values are a few of the amenities our community has to offer. You'll find all the professional challenges of a "big city" medical center with the atmosphere of a small, neighborly community. Our unofficial motto is "friends and neighbors taking care of friends and neighbors."





Carolinas HealthCare System Blue Ridge-Morganton

OUR MISSION

To enhance life by excelling in care.

OUR VISION

To be the best community healthcare system in America.

OUR VALUES

Carolinas HealthCare System Blue Ridge believes a solid foundation relies on having strong core values.

The values guiding us are:

CARING: We treat you with dignity, respect, courtesy and gentleness; responding to the needs of patients and each other.

COMMITMENT: We are dedicated to promoting a clean and safe environment; speaking up for the safety of our patients and each other.

INTEGRITY: We are honest and ethical; respecting the rights of patients, families and each other.

TEAMWORK: We are professionals working together; recognizing accomplishments of our patients and each other.

Carolinas HealthCare System Blue Ridge-Valdese



Graduate Medical Education at Carolinas HealthCare System Blue Ridge

GME Mission: To enhance life by training diverse, competent, compassionate and resilient physicians to improve and impact rural medicine.



DESIGNATED INSTITUTIONAL OFFICIAL

Anthony J. Frank, Jr., MD MBA FACEP CPE

SVP Medical Affairs

Chief Medical Officer

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Welcome to Morganton, North Carolina – “Nature’s Playground.” We cherish the opportunity to participate in your next phase of medical training as one of our residents or fellows. At Carolinas HealthCare System Blue Ridge, our unofficial motto is “We are friends and neighbors taking care of friends and neighbors.”

As a mid-sized community hospital, we function in a management agreement with Atrium Health which provides “Big City” back up to a strong community medical staff, medical facility, and progressive organization.

We recognize that our residents are key to achieving success and are our front line of care.

Our faculty love to teach and work with residents. They bring a diverse and vast clinical knowledge to our program and learners with a focus on the whole patient and how we care for patients in today's complex environment of care.

We actively recruit our trainees to stay with us or return after fellowship to our health system. This is an exciting time to be entering residency training at CHSBR. Welcome.

Sincerely,



ANTHONY FRANK, JR., MD, MBA, FACEP, CPE

STAFF

Michelle Collins

Senior Program Manager

Internal Medicine

Email: heather.collins@blueridgehealth.org

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Myra Spencer

Program Coordinator

Gastroenterology and Geriatric Medicine

Email: myra.spencer@blueridgehealth.org

Office: (828) 580-5366

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Internal Medicine Faculty



Rahul
Sampath, M.D.

Rahul Sampath, M.D.

Program Director

Email: rahul.sampath@blueridgehealth.org

Medical School:

Kasturba Medical College, Mangalore, Karnataka, India

Residency:

Baylor College of Medicine, Houston, TX

Fellowship:

Mayo Clinic, Rochester, MN

Board Certification:

American Board of Internal Medicine; Infectious Disease



Carolyn
Gordon, M.D.

Carolyn Gordon, M.D.

Associate Program Director

Email: carolyn.gordon@blueridgehealth.org

Medical School:

Emory University School of Medicine

Residency:

Carolinas Medical Center

Board Certification:

American Board of Internal Medicine



David
Burnette, D.O.

David Burnette, D.O.

Core Faculty

Email: kyle.burnette@blueridgehealth.org

Medical School:

Lincoln Memorial University – DeBusk College of Osteopathic Medicine

Residency:

Carolinas HealthCare System Blue Ridge

Board Certification:

American Board of Internal Medicine

Internal Medicine Faculty



Teresa
Campanile, M.D.

Teresa Campanile, M.D.

Core Faculty

Email: teresa.campanile@blueridgehealth.org

Medical School:

University of Connecticut School of Medicine

Residency:

Case Western Reserve University

Board Certification:

American Board of Internal Medicine



Ellen
Collett, M.D.

Ellen Collett, M.D., M.P.H.

Core Faculty

Email: ellen.collett@blueridgehealth.org

Medical School/Graduate School:

University of North Carolina School of Medicine

Residency:

Wake Forest University Baptist Medical Center

Board Certification:

American Board of Internal Medicine



Golnush
Sharafsaleh, M.D.

Golnush Sharafsaleh, M.D., M.S., FAAFP, AGSF

Geriatrics Fellowship Program Director/Core Faculty

Email: golnush.sharafsaleh@blueridgehealth.org

Medical School:

Ross University School of Medicine

Graduate School:

University of Utah – Gerontology

Residency:

Grant Hospital – Ohio Health

Fellowship:

Grant Hospital – Ohio Health

Board Certification:

American Board of Family Medicine, Geriatrics

Internal Medicine Overview

The Internal Medicine Residency Program matriculated its first class in 2011. Originally an AOA accredited program, it received ACGME accreditation in 2015. A unique feature of this program is its emphasis on cost conscious medical care and the difficulties faced by physicians practicing in rural America. The program provides residents with a diverse learning environment by utilizing primary, secondary and tertiary training sites in western North Carolina, all rich with pathology.

ADMISSION AND ELIGIBILITY

Our Internal Medicine Residency Program is open to graduates of an accredited medical school and are eligible to apply for a North Carolina resident training license. Applicants are selected for interviews based on evidence of their commitment to a career caring for patients, history of strong academic achievement, maturity, professionalism, and sound clinical skills. Please note that the program does not sponsor visas.

INTERNAL MEDICINE PROGRAM HIGHLIGHTS:

- Warm, supportive environment with approachable faculty and staff.
- High yield didactics and simulation to expand clinical knowledge.
- Opportunities for quality improvement research and national conference exposure.
- Inpatient Internal Medicine training at CHS Blue Ridge including intensive care, and emergency services.
- Outpatient general internal medicine training conducted at Mountain Valley Health Clinic located on the CHS Blue Ridge Morganton campus.
- Additional subspecialty training is done at various offices within CHSBR including Cardiology, Geriatrics, Gastroenterology, ENT, and the Salisbury Veterans Administration.

INPATIENT TRAINING

Inpatient Internal Medicine training is conducted at Carolinas HealthCare System Blue Ridge. We have two medicine teams in the inpatient setting. Team 1 is run by core medicine faculty and team 2 is a hospitalist-run service. ➡



Our healthcare heroes don't wear capes but they DO wear masks! We recently celebrated one of our very own healthcare heroes, Dr. Rahul Sampath, (center) our Infectious Disease Specialist and program director of the Internal Medicine Residency Program. We are truly grateful for his dedication to taking care of our patients and our community during this pandemic. He is our go-to expert for our COVID-19 related protocols. He is shown here with Drew Thomas, (left) VP of Physician and Ambulatory Operations, and Dr. Anthony Frank (right) GME Designated Institutional Official and Chief Medical Officer.

Internal Medicine Overview

Our hospital has:

- A 16-bed medical intensive care unit staffed by critical care specialists.
- Two emergency departments with more than 55,000 patients visits each year.
- Telestroke technology.

CHS Blue Ridge uses a fully integrated EMR, including computerized physician order entry and voice recognition software for dictating digital notes.

The program provides an average of 4 hours of didactics weekly including 1 hour of noon report and three hours of didactics covering high yield internal medical topics.

INTERN NIGHT FLOAT

Intern night float consists of two, 2-week blocks of nights (Sunday-Friday). In addition, interns will do 7-8 Saturday night call a year. Keep in mind interns do not take call in the ICU; interns do approximately five admissions at night; and interns start doing cross coverage of patients on the medicine services beginning in January of each year.

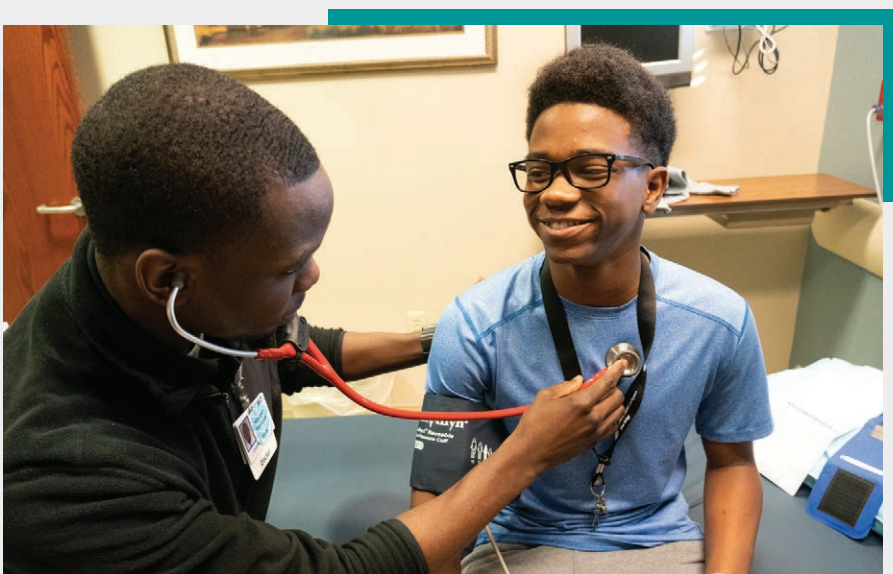
RESIDENT NIGHT FLOAT

Resident night float consists of two, 2-week blocks of nights a year (Sunday through Friday).

OUTPATIENT IM TRAINING

Outpatient Internal Medicine comprises a large portion of Internal Medicine training. It is an important part of IM even if you are planning on being a hospitalist or subspecialist. We believe that solid training in outpatient medicine is essential to creating a well-rounded internist.

All continuity clinics are done at Mountain Valley Health Clinic, which is located on the CHS Blue Ridge campus in Morganton. The clinic has a phlebotomy lab, anticoagulation clinic and a ➡



Carolinas HealthCare System Blue Ridge holds an "Athlete at Heart" event each spring for our student-athletes to get an EKG, general health screening, eye screening and agility test. GME residents, like Dr. Charlie Ervin, play a vital role in providing these physicals. Since it's inception, three athletes have been found to have serious heart defects and needed surgery.

Internal Medicine Overview

pharmacist present at the clinic for part of the week. Given our diverse patient population, we use digital interpreter technology that allows us to have a live interpreter at all times.

CONTINUITY CLINIC

- Faculty to Resident ratio is 1:3 leaving ample time for bedside teaching
- Nurse to Resident ratio is 1:2
- Fully integrated EMR is used in clinic and the hospital
- Attending physicians see all intern patients for the first six months
- Patient population is diverse with 45% Medicare patients and 20% privately insured patients
- The clinic also sees a large number of charity patients
- Patient numbers are: PGY1s 4-5, PGY2s 5-7, PGY3s 7-10 per half day

ANCILLARY OFFERINGS IN THE CLINIC:

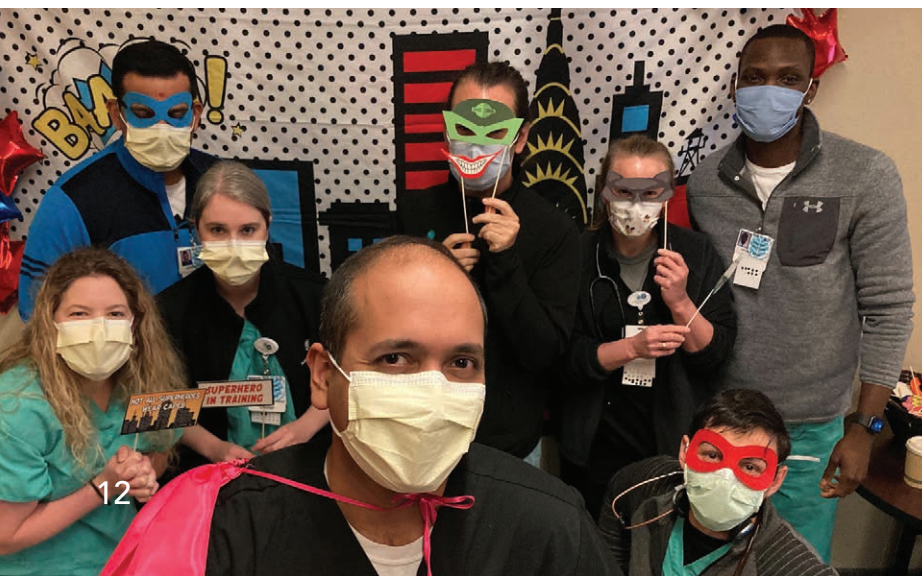
- Diabetes Education
- Heart Failure Education
- Nutrition Education
- Clinical Pharmacist
- Spirometry, POC testing, EKGs, IV fluids

Carolinas HealthCare System Blue Ridge

NRMP Program Code: 1914140C0

*these are zeros

*You will use this number to rank our program



Gastroenterology Fellowship Faculty



Gerald
Mank III, M.D.

Gerald W. Mank III, M.D.

Program Director

Email: Gerald.Mank@blueridgehealth.org

Medical School: The University of Texas at Houston

Residency and Internship:

The University of Texas at Houston

Fellowship in Gastroenterology and Hepatology:

The University of Texas at Houston and the University of Texas

MD Anderson Cancer Center

Board Certified: Internal Medicine and Gastroenterology



Nate
Krogel, D.O.

Nathaniel Ryan Krogel, D.O.

Core Faculty

Email: Nathaniel.Krogel@blueridgehealth.org

Medical School: Lake Erie College of Osteopathic Medicine

Residency:

Botsford Hospital, Farmington Hills, MI

Fellowship:

Botsford Hospital

Board Certified: Internal Medicine, Gastroenterology



Matthew
Mishoe, D.O.

Matthew T. Mishoe, D.O.

Core Faculty

Email: Matthew.Mishoe@blueridgehealth.org

Medical School: West Virginia School of Osteopathic Medicine

Residency and Fellowship:

Carolinas HealthCare System Blue Ridge

Board Certified: Internal Medicine



Suneel
Mohammed, M.D.

Suneel Mohammed, M.D.

Core Faculty

Email: Suneel.Mohammed@blueridgehealth.org

Medical School: Calicut Medical College, India

Residency:

University of Missouri/St. Luke's Hospital

Fellowship:

Brown University

Board Certified: Internal Medicine, Gastroenterology

Gastroenterology Fellowship Overview

Welcome to the Gastroenterology Fellowship Program at Carolinas HealthCare System Blue Ridge. We are fortunate and very honored to be one of only six facilities in North Carolina to have an ACGME accredited Fellowship in Gastroenterology. Our Fellows spend rotations in Hepatology and Advanced Endoscopy at Atrium Health's Carolinas Medical Center, during their tenure at CHS Blue Ridge.

ADMISSION AND ELIGIBILITY

Our Gastroenterology Medicine Fellowship is open to Internal Medicine graduates from ACGME or AOA residencies completed within the United States. Applications will be accepted through the Electronic Residency Application Service (ERAS). Please note that the program does not sponsor visas.

OUR CLINIC

The clinic for gastroenterology fellows is located on the Carolinas HealthCare System Blue Ridge Morganton campus. Each fellow has a weekly clinic session where they will participate in establishing care and managing chronic gastrointestinal diseases with a subset of patients assigned to them. Additionally, we participate in clinic with attendings in ambulatory settings in Marion, Valdese, and Morganton.

FELLOWSHIP PROGRAM HIGHLIGHTS INCLUDE:

- Warm, supportive environment with approachable staff
- Comprehensive didactics to expand and supplement gastrointestinal knowledge
- Opportunities for community and quality-improvement research
- Diverse patient population and pathology
- Good balance between service and education
- Teaching and working closely with internal medicine residents
- Shared call among fellows
- Transplant hepatology and advanced gastroenterology rotations available at Atrium Health's main campus located in Charlotte, North Carolina; housing provided
- Ability to moonlight with board certification in Internal Medicine ➡

Dr. Mohammed loves to ride his bike. Burke County has many mountain biking trails as well as easier, meandering routes along the Catawba River.



Gastroenterology Fellowship Overview

OUR CURRICULUM

The design of the gastroenterology curriculum at Carolinas HealthCare System Blue Ridge is aimed at creating an active and dynamic learning environment. Please see below for an overview of the educational program components.

PGY-4

- Inpatient GI Consult Svc - 6 months
- Outpatient GI Clinic/Endo 4 months
- Outpatient GI/Hepatology Consult – 1 month
- Hepatology @ Atrium Health - 1 month

PGY-5

- Inpatient GI Consult Svc –1 month
- Outpatient GI Clinic/Endo – 8 months
- Outpatient GI/Hepatology Consult – 1 month
- Outpatient GI/Motility/Nutrition – 1 month
- Hepatology @ Atrium Health – 1 month

PGY-6

- Inpatient GI Consult Svc – 1 month
- Outpatient GI Clinic/Endo – 8 months
- Outpatient GI/Motility/Nutrition – 1 month
- Advanced Endo/Biliary at Atrium Health – 1 month
- Hepatology at Atrium Health – 1 month ➔



Dr. Mank, far left, was the “Pepsi at the Half” guest during an Appalachian State University football game. He spoke about heartburn at Blue Ridge Digestive Health.

Gastroenterology Fellowship Overview

GRAND ROUNDS/ENDOSCOPY CONFERENCE

We participate in grand rounds and endoscopy conferences bimonthly. Grand round presentations are given by faculty and fellows as well as visiting lecturers. Furthermore, we review important endoscopic techniques, indications, and safety in a lecture setting periodically throughout the month.

JOURNAL CLUB, MORBIDITY AND MORTALITY CONFERENCE

A gastroenterology-focused journal club is held twice per month involving residents, fellows, and attendings to discuss validity of the chosen article, results, and clinical applicability of its findings. Our aim is to review newly-published articles to keep up-to-date with scientific research. Gastroenterology fellows also join the Medicine department for a monthly Morbidity and Mortality Conference, which focuses on the root-cause analysis of a case that had an adverse outcome. This is a multidisciplinary conference with representation involving a wide array of hospital departments. The goal of this conference is to educate the nursing staff, residents, fellows, and attendings on patient safety and increase awareness of system-based issues that contribute to a medical error.

BOARD REVIEW AND DIDACTICS

Board review is held weekly on Tuesdays. Fellow physicians will have content to read and review at the beginning of each week. Each week, fellow physicians will review their assigned reading and participate in board review questions related to the readings with an attending physician. Gastroenterology-specific radiology and pathology rounds are also scheduled to increase our breadth of knowledge.

Carolinas HealthCare System Blue Ridge

NRMP Program Code: N0470480

*these are zeros

*You will use this number to rank our program

Geriatrics Fellowship Faculty



Golnush
Sharafsaleh, M.D.

Golnush Sharafsaleh, M.D., MS, FAAFP, AGSF

Program Director

Email: Golnush.Sharafsaleh@blueridgehealth.org

Medical School: Ross University School of Medicine

Residency: Family Medicine, Grant Medical Center, Columbus, Ohio

Fellowship: Geriatric Medicine, Grant Medical Center, Columbus, Ohio



Anne
Gonzalez, M.D.

Anne Gonzalez, M.D.

Core Faculty

Medical School: Eastern Virginia Medical School, Norfolk, VA,

Residency: Family Medicine, University of South Carolina School of Medicine, Palmetto Richland Memorial Hospital, Columbia, SC

Fellowship: Geriatric Medicine, University of South Carolina School of Medicine, Palmetto Richland Memorial Hospital, Columbia, SC



Sara
Movaghar, D.O.

Sara Movaghar, D.O.

Core Faculty

Email: Sara.Movaghar@blueridgehealth.org

Medical School: Philadelphia College of Osteopathic Medicine

Residency: Internal Medicine, Carolinas HealthCare System Blue Ridge, Morganton

Fellowship: Geriatric Medicine, Carolinas HealthCare System Blue Ridge, Morganton



Edward
Plyler, M.D.

Edward Plyler, M.D.

Core Faculty

Medical School: University of North Carolina School of Medicine, Chapel Hill,

Internship: Richland Memorial Hospital, Columbia, South Carolina

Residency: Family Medicine, Richland Memorial Hospital, Columbia, S.C.

Geriatrics Fellowship Overview

Welcome to the Geriatric Medicine Fellowship Program at Carolinas HealthCare System Blue Ridge located in Morganton, NC. We are excited that you have chosen to review our program and that you have decided to further your career with a Geriatric Fellowship.

PROGRAM OVERVIEW

The one-year fellowship program will give the trainee an opportunity to learn Geriatric-focused medicine within the hospital, outpatient clinic, long term care facility, and the community. Our department strives to address health care disparities in the western North Carolina region. Our goal is to create compassionate, patient centered physicians who will choose to work in rural and underserved areas. Our fellows gain an understanding of the difficulties faced by physicians practicing in rural communities.

As Geriatric consultants, our fellows work closely with the internal medicine residents, hospitalists, and a variety of specialists. In addition to longitudinal clinical experiences, our program offers the opportunity for fellows to teach, participate in research, and in quality improvement projects. Our program director is personally involved in preceptorship in inpatient/outpatient settings, didactics, and board preparation.

ADMISSION AND ELIGIBILITY

Our Geriatric Medicine Fellowship is open to Internal Medicine and Family Medicine graduates from ACGME or AOA residencies completed within the United States. Applications will be accepted through the Electronic Residency Application Service (ERAS). ➔



Dr. Allison Combs (left) board certified by the American Board of Internal Medicine, is a member of the American Geriatric Society. She was Internal Medicine Chief Resident in 2018-19 and Internal Medicine Intern of the Year in 2016-17. She now works at Blue Ridge Geriatrics.

Geriatrics Fellowship Overview

We request that applicants complete an ERAS application and provide documentation to support that they have successfully completed or will be completing a residency program, a current CV, a one page personal statement outlining their career goals and objectives, two letters of recommendation, and USMLE or COMLEX scores. Please note that the program does not sponsor visas.

OUR CLINIC

The Geriatric clinic is located on the Carolinas Health Care System Blue Ridge campus. The geriatric fellow will have a longitudinal experience in the ambulatory setting. Fellow physicians will work two half days a week in the Geriatric Clinic, providing both primary care services and consultative care.

Fellow physicians learn to distinguish normal physiologic changes associated with aging, compared to those associated with disease. The Geriatric Fellow will have exposure to common disease processes including but not limited to Dementia, Delirium, Osteoporosis, Polymyalgia Rheumatica, Depression, Polypharmacy, Urinary incontinence, Overactive bladder, Parkinson's disease, Falls, constipation, Terminal disease, malnutrition, sleep disorders, malignancy and wound management. The Geriatric fellow will learn to use common Geriatric tools, as well as learn to perform minimally invasive procedures.

FELLOWSHIP PROGRAM HIGHLIGHTS INCLUDE:

- Warm, supportive environment with approachable faculty
- Weekly Didactics and board review with Geriatric Faculty
- Dedicated personal time with Program Director for education and career development
- Opportunities for community and quality research
- Diverse patient population and pathology
- Good balance of education and service
- Teaching and working closely with Internal medicine residents
- Minimal to no call
- Ability to moonlight with board certification in Internal or Family medicine

Carolinas HealthCare System Blue Ridge

NRMP Program Code: N0442626

*these are zeros

*You will use this number to rank our program

SYSTEM PROFILE

Carolinas HealthCare System Blue Ridge-Morganton
Carolinas HealthCare System Blue Ridge-Valdese
Grace Ridge Retirement Community
Phifer Wellness Center
Blue Ridge Medical Group - System-owned practices
Advanced Imaging Services: MRI, CT, PET
Anesthesiology
Behavioral Health
Cancer Care
Cardiac Services

- Rehabilitation
- Catheterization Lab
- Interventional Cardiology

Critical Care
Progressive Care
Diabetes Education & Support
Ear, Nose & Throat
Emergency Medicine
Family Medicine
Gastroenterology
General Surgery

Hematology
Hospitalist Services
Infectious Disease
Inpatient Dialysis/Nephrology
Internal Medicine
Interventional Radiology
Level II Nursery & Level II Neonatology
Medical & Radiation Oncology
Neurology
OB/GYN
Orthopedics & Sports Medicine
Pain Management
Pathology
Pulmonology
Rehabilitation Services
Surgical Services
Urology
Vascular Surgery
Wound Care Center



Blue Ridge Medical Group Specialty Services

Levine Cancer Institute Blue Ridge at Valdese

828-580-7536

720 Malcolm Blvd.
Valdese, NC 28690

Southeast Pain and Spine Care

828-580-7620

720 Malcolm Blvd., Third Floor
Valdese, NC 28690

The Comprehensive Wound Healing Center at Valdese

828-580-7563

722 Malcolm Blvd.
Valdese, NC 28690

Blue Ridge Cardiology

828-580-1364

2293 Sugar Hill Road, Suite A
Marion, NC 28752

Women's Health-Marion

828-652-3019

2293 Sugar Hill Road, Suite C
Marion, NC 28752

Medical Office Building-Morganton

2209 S. Sterling St.
Morganton, NC 28655

Blue Ridge Cardiology

Suite 530 | **828-580-4230**

Blue Ridge Digestive Health-Morganton

Suite 200 | **828-580-6752**

Blue Ridge Pulmonary & Sleep Medicine

Suite 600 | **828-580-4577**

Blue Ridge Surgery-Morganton

Suite 530 | **828-580-2250**

Blue Ridge Urology-Morganton

Suite 530 | **828-580-4334**

Women's Health-Morganton

Suite 400 | **828-580-4661**

Blue Ridge ENT & Allergy

828-580-6410

352B E. Parker Road
Morganton, NC 28655

Blue Ridge Infectious Disease

828-580-5705

117 Foothills Drive
Morganton, NC 28655

Blue Ridge Geriatrics

828-580-5706

111-B Foothills Drive
Morganton, NC 28655

Blue Ridge Neurology

828-580-8100

113-A Foothills Drive
Morganton, NC 28655

Medical Office Building-Valdese

730 Malcolm Blvd.
Rutherford College, NC 28671

Blue Ridge Digestive Health-Valdese

Suite 220 | **828-580-7048**

Blue Ridge Surgery-Valdese

Suite 100 | **828-580-3572**

Blue Ridge Urology-Valdese

Suite 100 | **828-580-7962**

Carolina Digestive Care

828-437-7702

107-B Mica Avenue
Morganton, NC 28655

Alan F. Jacks, MD Surgery

828-580-3555

845 Malcolm Blvd.
Rutherford College, NC 28671

J.I. Patel, MD Surgery

828-580-7655

560 Malcolm Blvd.
Rutherford College, NC 28671

Southeast Pain and Spine Care

828-580-2280

2134 14th Ave. Circle
Hickory, NC 28601

Women's Health-Hickory

828-580-2129

2134 14th Ave. Circle
Hickory, NC 28601

Women's Health-Valdese

828-580-7430

110 Hilltop Street
Rutherford College, NC 28671

Blue Ridge Medical Group Internal / Family Medicine

Medical Office Building-Valdese

730 Malcolm Blvd.
Rutherford College, NC 28671

Rutherford College Medical Care Center

Suite 230 | **828-580-2811**

Valdese Medical Associates

Suite 150 | **828-580-8684**

Valdese Express Care

Suite 150 | **828-580-7387**

Cajah's Mountain Medical Associates and Express Care

828-728-8224

1766 Connelly Springs Road
Lenoir, NC 28645

Drexel Medical Practice

828-580-4080

2659 US 70 E
Valdese, NC 28690

Medical Office Building-Morganton

2209 S. Sterling St.
Morganton, NC 28655

Family Medical Associates

Suite 300 | **828-580-4010**

Lenoir Family Medicine

828-580-4660

1041 Morganton Blvd., SW,
Suites 100 & 200
Lenoir, NC 28645

McDowell Medical Associates-Marion and McDowell Express Care

828-652-8727

2293 Sugar Hill Road
Marion, NC 28752

McDowell Medical Associates-Nebo

828-659-9703

5920 US 70 E
Nebo, NC 28761

Mountain Valley Health Center

828-580-2700

117 Foothills Drive
Morganton, NC 28655

Table Rock Family Medicine

828-580-1400

301 Linville St.
Glen Alpine, NC 28628

URGENT CARE

Blue Ridge Urgent Care-Morganton

828-580-3278

695 West Fleming Drive
Morganton, NC 28655

SERVICE LINES

CANCER

Levine Cancer Institute Blue Ridge is continuing a long tradition of quality cancer treatment established in Valdese. By building upon the foundation of strong radiation and chemotherapy programs, we offer the latest advances close to home. Our affiliation with Carolinas HealthCare System's Levine Cancer Institute in Charlotte, gives you access to world-class research, breakthrough treatments and groundbreaking clinical trials.

Services provided:

- Advanced Radiation Treatment, such as IGRT, IMRT and Brachytherapy
- Board Certified Oncologists
- Oncology Certified RNs
- Cutting-edge Medical Oncology Treatment
- Staging and Planning
- Multi-Slice CT and PET/CT
- Breast Health Navigator
- Active Support Groups
- Oncology Advocates
- Supportive Care

DIGESTIVE HEALTH

Gastroenterology is the study, diagnosis and treatment of gastrointestinal (GI) disorders and conditions. The GI tract starts with the mouth and follows the digestive system through the esophagus, stomach, small and large intestine (colon), and rectum. Digestive Health Services at Carolinas HealthCare System Blue Ridge also treat diseases of the liver, pancreas and gallbladder.

Services provided:

- Colorectal Cancer screening with colonoscopy and removal of polyps
- Removal of hemorrhoids and treatment of Anal-Rectal Disease
- Treatment of GERD and its complications
- Treatment of Inflammatory Bowel Disease, Irritable Bowel Syndrome, chronic constipation and diarrhea
- Treatment of liver diseases including Hepatitis
- Treatment of Ulcer Disease
- Treatment of pancreatic diseases
- Treatment of gallbladder diseases including gallstones

EAR, NOSE & THROAT AND ALLERGY

Diagnosing and treating problems of the ears, nose and throat is called Otolaryngology or simply ENT. Along with ears, nose and throat, ENT services at Carolinas HealthCare System Blue Ridge covers allergies, sinuses, respiratory system, thyroid, parathyroid, voice box (larynx) and other disorders of the head and neck.

Services provided:

- Allergy evaluation and treatment
- Evaluation and treatment of the ear, nose and throat
- Hearing evaluation
- Vocal cord evaluation
- Sinus disorders
- In-office balloon sinuplasty
- Thyroid/ Parathyroid Disorders
- Head and Neck Cancer
- Skin cancer
- Pediatric care
- Ear tubes
- Tonsils

SERVICE LINES

EMERGENCY SERVICES

With locations at both the Morganton and the Valdese Campuses, Carolinas HealthCare Systems Blue Ridge offers 24/7 comprehensive Emergency Medical Care from a multidisciplinary team of physician assistants, nurse practitioners, registered nurses, technicians and additional support staff who are trained in providing emergency care. Our team combines advanced training with compassionate service to be ready for you or your family when you need it the most. Our staff is trained to respond to any type of medical emergency. Emergency care includes but not is limited to:

- 24-hour staff readiness
- State-of-the-art diagnostic and treatment equipment to help track and monitor patient progress.
- Digital radiology rooms that are located in the department.
- Sophisticated computer technology that provides patient lab results, diagnostic information, discharge information and other confidential data quickly and securely.
- Direct access to cardiologists for emergent cardiac care.
- Emergent CT scanning, Teleneurology consultation and medication administration for stroke patients.
- Telepsychiatry and placement services for acute behavioral health issues

HEART AND VASCULAR

From treatments for congestive heart failure to cardiac caths and a pacemaker clinic, we offer experience and technology to diagnose and treat heart disease. Our board-certified cardiologists have performed thousands of cardiac catheterizations and interventional procedures.

Services provided:

- Coronary Artery Disease - diagnosis, treatment and prevention
- Cardiac catheterization and intervention
- Nuclear Stress Testing and Echocardiograms
- Peripheral Vascular Disease: Blocked arteries or blood vessels to the buttocks, thighs, legs, and feet sometimes can be repaired through stents and/or balloons
- Congestive Heart Failure - diagnosis & management
- Heart rhythm abnormality management
- Evaluation and management of heart valve disease



SERVICE LINES

KIDNEY HEALTH

Nephrologists are internal medicine physicians who specialize in diseases involving the kidneys. You may receive a referral to one of these doctors if you have protein or blood in your urine, uncontrolled high blood pressure, kidney stones, or you develop kidney failure.

Conditions commonly treated:

- Prevention of recurrent kidney stones (Nephrolithiasis)
- Treatment of acute or chronic kidney disease
- Treatment of difficult to control high blood pressure
- Treatment of Polycystic Kidney Disease
- Administering dialysis
- Treatment of End-Stage Renal Disease
- Stabilizing electrolyte disorders or acid/base imbalance
- Post kidney transplant care
- Post care kidney biopsy

NEUROLOGY

Neurology is the diagnosis and treatment of disorders affecting the brain, nerves, muscles, and spinal cord. At Carolinas HealthCare System Blue Ridge, we offer Botox® to treat migraines and diagnostic tests such as Electroencephalogram (EEG) and Electromyogram (EMG). We treat children and adults.

Conditions commonly treated:

- Stroke
- Epilepsy
- Headache
- Seizures
- Developmental delay
- Tics/abnormal movements
- Weakness
- Head injuries
- Dizziness
- Memory loss/dementia
- Multiple Sclerosis (MS)
- Parkinson's Disease

ORTHOPEDICS

Orthopedics focuses on the diagnosis and treatment of disorders and injuries of the bones, and the related muscles, tendons, ligaments and nerves. We care for the spine, joints, hands and feet. Orthopedic services at Carolinas HealthCare System Blue Ridge treats:

- Carpal tunnel syndrome
- Hand and upper extremity pain
- Arthroscopic surgery - shoulder, elbow, knee, ankle and wrist
- Osteoarthritis
- Children's hand and upper extremity injuries
- Back and neck pain
- Ruptured discs
- Scoliosis
- Occupational back and neck trauma
- Spinal fractures
- Osteoporosis of the spine
- Joint reconstruction of the hip, knee and shoulder
- General orthopedics

JOINT AND SPINE ACADEMY

Designed to meet the needs of the joint replacement and spinal surgery patients, the Joint and Spine Academy is an educational session covering all phases of your care both before and after surgery. The team who will be taking care of you during your hospital stay presents the class. These individuals may include a nurse, physical therapist, case manager and occupational therapist.

SERVICE LINES

PULMONARY AND SLEEP MEDICINE

Blue Ridge Pulmonary and Sleep Medicine offers the services of lung specialists, known as pulmonologists. Our board-certified physicians are experienced in managing the care of critically ill patients including those on mechanical breathing support. We also do sleep studies and tests to diagnose sleep apnea, narcolepsy and other sleep disorders.

Pulmonary services provided:

- Chronic obstructive pulmonary disease (COPD)
- Lung cancer
- Asthma
- Smoking cessation
- Critical care medicine
- Evaluation of dyspnea and cough
- Sleep Medicine Services provided:
- Diagnosis and treatment of obstructive sleep apnea in adult patients
- Restless legs syndrome
- Narcolepsy
- Excessive sleepiness
- Insomnia

We are the only accredited sleep lab in the region.

RADIOLOGY

The Diagnostic Imaging Centers at Carolinas HealthCare System Blue Ridge offer outstanding services, including:

- X-ray
- Ultrasound
- CT (Computed Tomography)
- Interventional Radiology
- Breast Tomosynthesis
- Bone Density
- Nuclear Medicine
- PET Scanning
- Mammography
- MRI
- Breast MRI

The Imaging Centers have won 5-Star awards for excellence in patient quality and service - and have some of the highest satisfaction scores in the Atrium Health system.

REHABILITATION

Blue Ridge Therapy Services at Carolinas HealthCare System Blue Ridge is a team approach with the patient as the most important member. Our patients are active participants in setting their rehabilitation goals and establishing treatment programs with direction from our professionals: Physical Therapists, Occupational Therapists and Speech Therapists. Let us help you reach your rehabilitation goals.

Therapy we offer:

1. Physical

- Sports medicine
- Total joint
- Non-surgical & surgical back/spine
- Balance and walking training
- Hand

2. Occupational

- Functional capacity evaluation for employment
- Industrial medicine
- Work conditioning
- Hand

3. Speech

More specialized therapies include isokinetic testing and exercises, soft tissue massage, neurological/neuromuscular, aquatic/pool, wheelchair seating and VitalStim, a therapeutic intervention for use in the treatment of swallowing disorders (dysphagia). We offer customized education programs and ones in wound care, lymphedema (swelling in arms and/or legs) and pain management.

SERVICE LINES

SPINE HEALTH

Our spine health team of top physical therapists, pain management specialists and spine surgery experts work together to provide a personal care plan to treat your back pain. With the latest in non-surgical and surgical techniques and technology, we get you back to what you love, with less pain, faster.

We stay on the forefront of innovative practices and advanced technology. If surgery is required, our spine specialists are experts in minimally invasive surgical techniques and use the latest in 3D intraoperative imaging, for faster recovery and better results

At the Blue Ridge Spine Center, our experienced physicians and staff provide the latest advances in spine care, from innovative non-surgical and surgical treatments to state-of-the-art equipment. We use a team of medical experts to develop your personalized care plan.

SURGERY

Specializing in General and Vascular Surgery, Carolinas HealthCare System Blue Ridge board-certified surgeons perform thousands of procedures every year. Our staff is skilled in the diagnosis and management of diseases affecting veins and arteries. Vascular diseases and their consequences are among the most common causes of death and disability.

Procedures performed:

- Vascular (veins & arteries) surgery
- Cancer surgery
- Kidney problems and dialysis
- Endocrine (thyroid and parathyroid) surgery
- Thoracic (organs of the chest) surgery
- General and laparoscopic surgeries (Lap Cholecystectomy, Lap Appendix, Lap Hernia repair, Lap Lynx, Lap Hiatal Hernia)
- Open and Video assist Thoroscopic (lung)
- Open and Laparoscopic Gynecological - hysterectomy (TLH as well as TVH (vaginal),
- Diagnostic procedures (lap tubal and lap tube and ovary removal)
- Orthopedic (arthroscopic knees, shoulders, ankles, and wrist) , fracture fixations, Total Joint replacements of shoulders, knee, and hips, carpal tunnel and trigger releases
- Spine procedures - microdiscectomy, fusions of cervical and lumbar spine, kyphoplasty
- Eye - retinal specialists
- Urological
- ENT (Ears, Nose Throat)
- EGD, Enteroscopy, Colonoscopy, and ERCP

UROLOGY

The organs covered by Urology include the kidneys, ureters, urinary bladder, urethra, and the male reproductive organs. We are also involved in the assessment and treatment of incontinence.

Services provided:

- Adrenal cancer
- Bladder cancer
- Kidney cancer
- Kidney stones
- Prostate cancer
- Prostatitis
- Incontinence
- Overactive bladder
- Male infertility
- Testicular cancer
- Bedwetting
- Vasectomy
- Bladder control problems
- Enlarged prostate (BPH)
- Blood in the urine
- Male sexual dysfunction
- Urinary Tract Infection (UTI)

SERVICE LINES

WOUND CARE

Our professional staff provides the most advanced treatment available, including hyperbaric oxygen therapy, for serious, chronic wounds. Our nationally recognized approach helps speed recovery so you can return to the activities you love. We'll work with your personal doctor to create a treatment program just for you. Wound care treatment may include:

- Hyperbaric therapy
- Debridement
- Skin substitutes
- Unna boots
- Compression wraps
- Nutritional management
- Physical therapy
- Pain management
- Vascular evaluation
- Laboratory evaluation
- Diabetic education
- Nuclear medicine

WOMEN'S HEALTH

Women's Health and the Family Center offer a comprehensive range of gynecological services, including general gynecology, wellness exams, menopause treatments, management of urinary incontinence and the latest in contraception.

Our skilled gynecological surgeons offer many minimally invasive procedures to quickly return you to the activities you enjoy. We also provide advanced in-office procedures and other convenient services, including:

- In-office endometrial ablation
- Loop electrical excision procedure
- Diagnostic and operative laparoscopy
- Laparoscopic tubal ligation
- Vaginal and laparoscopic hysterectomy
- Diagnostic and operative hysteroscopy
- Urinary incontinence sling (TVT)

Pregnancy, Labor and Delivery

Our team offer high-quality care for both routine and high-risk pregnancies at all of our locations. Patients will be seen by primarily one obstetrician to provide continuity of care during pre-natal visits.

Our modern labor and delivery suites at Carolinas HealthCare System Blue Ridge Morganton are comfortable and inviting as well as equipped with state-of-the-art technology. We feature the region's only 24-hour in-house neonatal service. Our Level II Neonatal Intensive Care Nursery provides peace of mind that high level care is readily available for your infant if the need arises.

We also provide the following:

- Childbirth Education Classes
- Newborn Care, including Newborn Hearing Screening, Congenital Heart Disease Screening, State Newborn Screening, Newborn Photography, Breastfeeding
- Lactation Services with trained nurses

SERVICE LINES

The Diagnostic Center

This department can run a variety of tests to study your heart, arteries and lungs. Some of the procedures performed are:

Cardiac:

- Out-Patient only Nuclear Stress Test Exercise/Cardiolite - patient can walk on treadmill
- Out-Patient only Nuclear Stress Test Lexiscan/Cardiolite - patient cannot walk on treadmill
- Exercise Stress Test (GXT)
- Exercise Stress Echo Test – patient can walk on treadmill
- Dobutamine Stress Echo - patient cannot walk on treadmill
- Echocardiogram
- Transesophageal Echocardiogram we perform in the Cath Lab and in CCU
- Cardiograms (EKGs)
- Out-Patient only Holter Monitors (24 hr.)
- Out-Patient only Holter Monitors (48 hr.)

Arterial Vascular Testing:

- ABI (Ankle Brachial Index) (Duplex)
- ABI with Exercise
- Unilateral Lower Extremity
- Bilateral Lower Extremity

Electroencephalography:

- EEG Sleep Deprived/Drowsy
- EEG Routine Awake/Drowsy
- EEG Extended Study 1hr., 2hr.
- Out-Patient only EEG Ambulatory 24hr., 48hr. and 72hr.
- In-Patient only EEG Video

Pulmonary:

- Arterial Blood Gases
- Lung Parameters with Negative Inspiratory Force
- Spirometry
- Spirometry Pre and Post Bronchodilator
- Complete Pulmonary Function Test: Total lung capacity, diffusion study (DLCO), spirometry pre and post bronchodilator.

In-Patient Respiratory

- Intubations
- Set up and maintain Ventilators
- Set up and maintain Bi-paps
- Nebulizer treatments
- Meter Dose Inhalers
- Draw and Run Blood
- Arterial & Venous Blood Gas
- Lactate, Cord Gas
- Attend High Risk Deliveries
- COPD education, Smoking Cessation

YOUR BENEFITS



Benefits Provided
at No Cost



Benefits Provided at No Cost

- Employee Assistance Program
- Employee Emergency Fund
- Worker's Compensation
- Tuition Reimbursement
- Credit Union
- Clinical Support (meal allowance, white coats, reimbursement on COMLEX/USMLE Step 3 with passing scores)



Health & Wellness
Benefits



Health and Wellness Benefits

- Carolinas HealthCare System Blue Ridge Teammate Health Plan
- Dental
- Vision
- WELLWORxsm Incentives



Retirement
Plans



Retirement Plan

- 403(b) Basic and Matching Contributions



Income
Protection
benefits



Income Protection Benefits

- Short-Term and Long-Term Disability
- CHSBR Provided Life Insurance and Access to Group Rates for Additional Life Insurance



Time Away
from Work



Time Away from Work

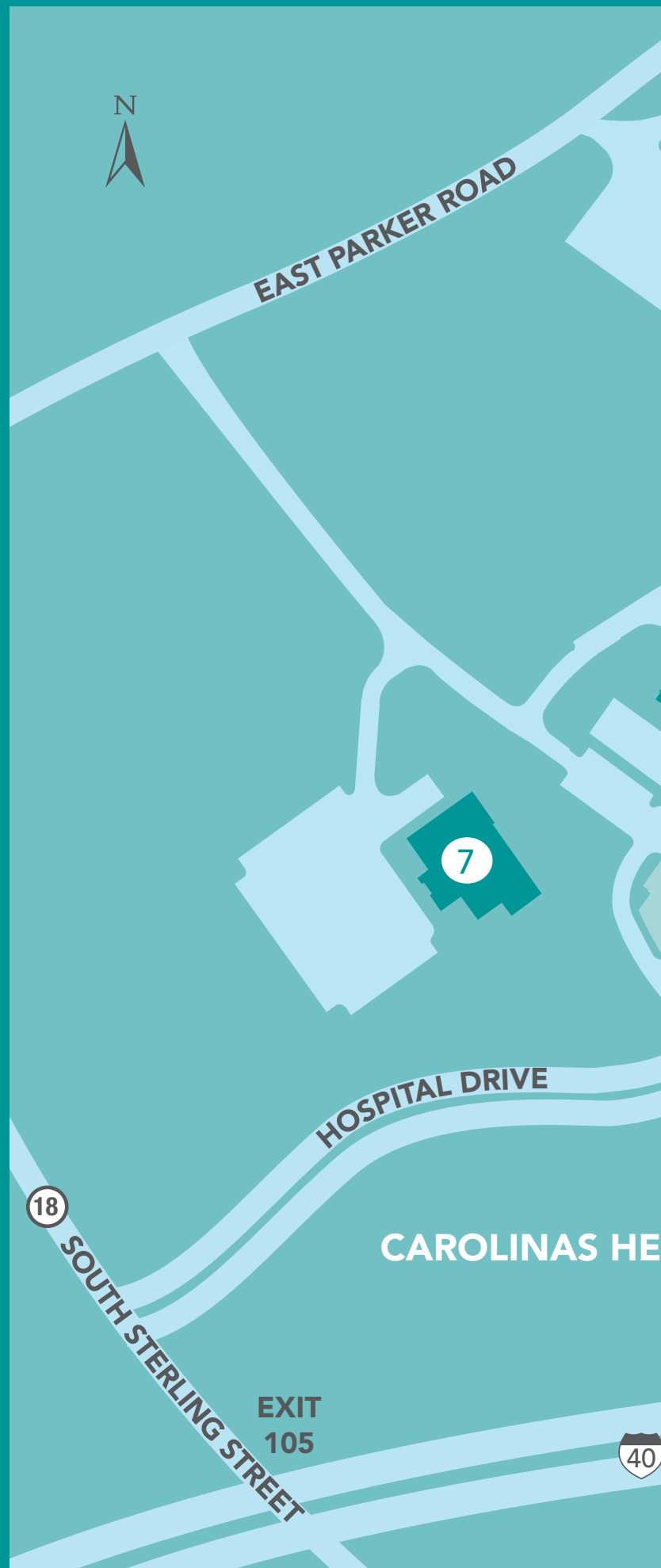
- Paid Time Off
- Leave of Absence
- Maternity/ Paternity Leave
- Adoption Benefits



Carolinas HealthCare System Blue Ridge - Morganton Campus Map

- ① **EMERGENCY**
- ② Main Entrance
- ③ Outpatient Surgery
- ④ Patient Rooms
- ⑤ Medical Office Building
- ⑥ Grace Heights
- ⑦ Phifer Wellness Center
- ⑧ Professional Office Building
- ⑨ Learning Center
- ⑩ Physician Offices - South
- ⑪ Physician Offices - North

Carolinas HealthCare System
Blue Ridge - Morganton
2201 South Sterling Street
Morganton, NC 28655
828-580-5000





ALTHCARE SYSTEM BLUE RIDGE – MORGANTON





Lobby Level

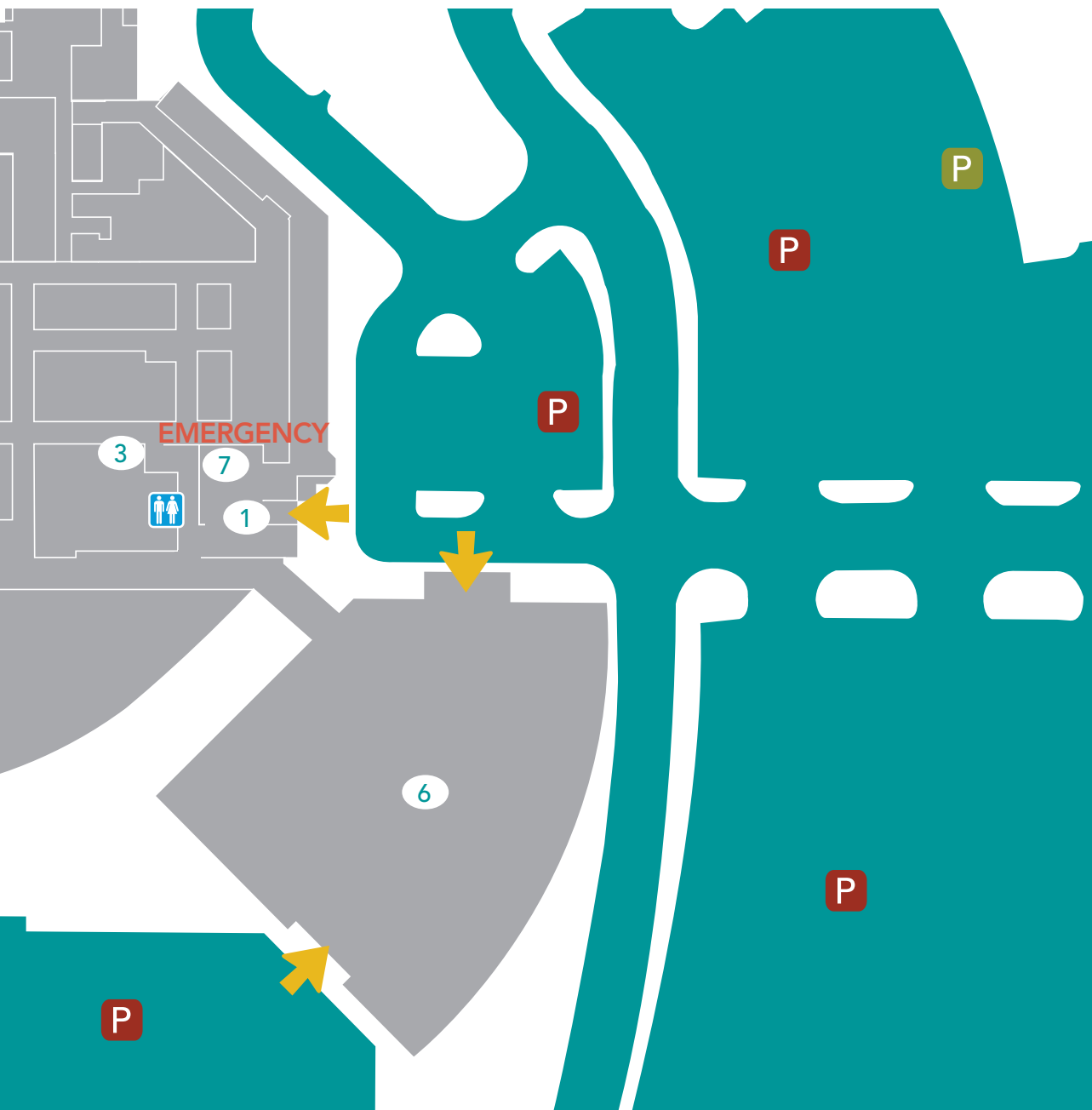
- 1 ATM
- 2 Cardiopulmonary Services
- 3 Cashier
- 4 Chapel
- 5 Guest Services
- 6 Medical Office Building
- 7 EMERGENCY
- 8 Gift Shop
- 9 Imaging Services (CT, MRI, X-Ray)
- 10 Ladies Health Pavilion (Mammography)
- 11 Laboratory Services Check-In
- 12 Outpatient Surgery Check-in
- 13 Outpatient Surgery Waiting
- 14 Vending
- 15 Visitor Elevators

Lower Level

- Administration
- Atrium Seating
- Cafeteria
- Medical Records
- Visitor Elevators
- Patient Registration (Admissions)

3rd Floor

- Patient Rooms 301-312
- Family Center Rooms 314-329
- Family Lounge
- Vending



4th Floor

Patient Rooms 401-434
Visitor Lounge

5th Floor

Critical Care Unit North
Critical Care Unit South
Patient Rooms 501-584

6th Floor

Patient Rooms 601-684



Entrance



Employee Parking



Patient/Visitor
Parking



Restrooms

Carolinas HealthCare System Blue Ridge - Morganton
Interior Map

Graduate Medical Education Policies and Procedures

GME Policy 011: RESIDENT/FELLOW FINANCIAL SUPPORT AND BENEFITS

1. During the 2020 - 2021 academic year, salaries for House Staff in the Graduate Medical Education Programs at Carolinas HealthCare System Blue Ridge are as follows.

PGY LEVEL	SALARY
PGY-1	\$50,200
PGY-2	\$51,400
PGY-3	\$53,200
PGY-4	\$61,700
PGY-5	\$63,200
PGY-6	\$64,700

2. As a resident/fellow with Carolinas HealthCare System Blue Ridge, you are provided with a wide variety of excellent benefits. Benefit reviews are provided during orientation and when changes are made.
3. Some of the benefits accessible to residents/fellows and their eligible dependents at Carolinas HealthCare System Blue Ridge include:
 - Paid time off: 20 days annually for residents/fellows
 - *Medical and Dental Insurance Plans
 - *Prescription drug discounts
 - *Group life insurance
 - *Short and long-term disability
 - Tax deferred annuity (403b)
 - Medical and daycare spending accounts
 - Employee Wellness Program
 - Phifer Wellness Center discounts
 - Employee Assistance Program
 - Employee Emergency Fund
 - Scholarships and tuition assistance
 - Group discounts
 - Banking services
 - *additional premium may apply

GME POLICY 012: RESIDENT/FELLOW PAID TIME OFF AND LEAVE OF ABSENCE

PURPOSE

Residents and Fellows will receive Paid Time Off (PTO) each academic year as indicated below. Under qualifying circumstances, residents/fellows have the option of receiving an extension through the Family Medical Leave Act (FMLA) or other approved leaves of absence(s). Any leave of absence may impact the criteria for satisfactory completion of the program and may impact the resident's/fellow's eligibility to participate in examinations by the relevant certifying board(s). In order to meet the requirements of length of training, an extension or "make up time" at the end of the residency/fellowship period will follow the appropriate Residency Review Committee guidelines, relevant certifying board certification requirements, and will be discussed with the resident/fellow at the initiation of their leave or as soon as the information is available. Institutional Requirements [IV.G.2.]

LEAVE(S) OF ABSENCE

1. It is the responsibility of each Program Director, DIO, and/or GME staff to advise residents/fellows of the effect of any leave of absence on satisfying the criteria for completion of the residency/fellowship program and eligibility for certification by the relevant certifying board.
2. Current requirements for program completion and eligibility for specialty board examinations is available to all trainees via the specialty board's website and a link is provided in New Innovations.
3. Resident/Fellow time off guidelines and GME Policy 012 are presented annually to all trainees during the onboarding process and during the annual renewal of the House Staff Agreement.
4. Trainees have access to all GME policies through a link in New Innovations and through the GME office. Trainees are required to review GME policies annually which is monitored in New Innovations and follow up is provided to those in non-compliance.

If questions or concerns arise, trainees are advised to seek guidance from the Program Director, DIO, and/or GME staff.

PAID TIME OFF (PTO)

1. PGY-1 through PGY-3 residents are permitted 20 days of PTO each academic year to be used for personal time off, sickness, or emergencies.
 - a. Time off requested for poster presentations at Regional/National Conferences may be permitted for the first author of a poster, and an additional high value collaborator with Program Director approval. Up to 5 business days may be used for this over three years that will not be deducted from the 20 days of PTO/year. Reimbursement for conference attendance where a candidate is presenting is to be restricted to 2 nights stay and will depend on the applicants CME funds available.
 - b. Time off requested to attend CME conferences (not presenting a poster), requires Program Director approval. This time off will be deducted from the 20 days of PTO.
 - c. Time off requested for COMLEX 3/USMLE 3 exams, requires Program Director approval. This time off will not be deducted from the 20 days of PTO.
2. PGY-4 through PGY-6 fellows are permitted 20 days of PTO each academic year to be used for personal time off, sickness, interviews, or emergencies.
 - a. Time off requested for poster presentations at Regional/National Conferences may be permitted for the first author of a poster, and an additional high value collaborator with Program Director approval. Up to 5 business days may be used for this over three years that will not be deducted from the 20 days of PTO/year. Reimbursement for conference attendance where a candidate is presenting is to be restricted to 2 nights stay and will depend on the applicants CME funds available.

- b. Time off requested to attend CME conferences (not presenting a poster), requires Program Director approval. This time off will be deducted from the 20 days of PTO.
 - c. Time off requested for specialty-specific certifying board exams, requires Program Director approval. This time off will not be deducted from the 20 days of PTO.
 - d. Time off requested to attend specialty-specific required CME conferences, requires Program Director approval. This time off will not be deducted from the 20 days of PTO.
3. A 90-day notice for time off must be provided with the exception of an emergency. Any requests received with less than 90 days' notice will be reviewed on a case by case basis and approved at the discretion of the Program Director.
4. To promote resident wellness, out of the 20 days of PTO allowed per academic year, two weeks of vacation (10 days) must be used as follows:
 - a. One week of vacation (5 consecutive days) must be used during the first half of the academic year (July - December).
 - b. One week of vacation (5 consecutive days) must be used during the second half of the academic year (January-June).
5. Multiple requests to take off extended weekends, including Friday's and Monday's during the same rotation, require Program Director approval.
6. Vacation scheduling will be done on a first come, first serve basis.
7. No more than one week of vacation (5 days) can be taken off during any rotation.
8. Program Assignment, performing duties required of or benefiting the institution or program, may be granted outside of the standard requirements for time off, i.e.; residency recruitment events, chief resident workshop, BLS/ ACLS at Carolinas HealthCare System Blue Ridge.
9. Vacation time is not transferable from one academic year to the next academic year.
10. Individual programs may have additional requirements/exceptions for allowable time off for residents while on specific rotations.
11. No vacation will be taken during the last week of June or the first week of July.

NOTE: A 90-day notice for time off must be provided except for an emergency. Any requests received with less than 90 days' notice will be reviewed on a case by case basis and approved at the discretion of the Program Director.

PROCESS

1. Resident/fellow submits a Request for Time Off form to their chief resident, if applicable.
2. Requested time must be approved and form signed by the chief resident, Program Director, and practice manager.
3. A copy of completed form is routed to Residency Coordinator for processing.
4. Resident/Fellow must notify preceptor of rotation during which the time off is requested.

GME POLICY 015: RESIDENT/FELLOW QUALIFICATIONS

An applicant must meet one of the following qualifications to be eligible for appointment to an ACGME accredited program:

1. Graduation from a medical school in the United States or Canada, accredited by the Liaison Committee on Medical Education (LCME); or, (Institutional Requirement IV.A.2.a.)
2. Graduation from a college of osteopathic medicine in the United States, accredited by the American Osteopathic Association (AOA); or, (Institutional Requirement IV.A.2.b)
3. Graduation from a medical school outside of the United States or Canada, and meeting one of the following additional qualifications: (Institutional Requirement IV.A.2.c)
 - a. Holds a currently-valid certificate from the Educational Commission for Foreign Medical Graduates prior to appointment; or, (Institutional Requirement IV.A.2.c).(1)
 - b. Holds a full and unrestricted license to practice medicine in a United States licensing jurisdiction in his or her current ACGME specialty-/subspecialty program; or, (Institutional Requirement IV.A.2.c).(2)
 - c. Has graduated from a medical school outside the United States and has completed a Fifth Pathway** program provided by an LCME-accredited medical school. (Institutional Requirement IV.A.2.c).(3)
4. Prior to starting the PGY-1 year, all incoming trainees must pass COMLEX 1, COMLEX 2 CE and PE and/or USMLE Step 1, USMLE Step 2 CK and CS licensing exams.
5. Residents are required to take their COMLEX 3 and/or USMLE Step 3 exam in their PGY-1 year, unless granted an extension by the Program Director. In order to receive a contract to advance to PGY-3, the resident must present a passing COMLEX 3 and/or USMLE Step 3 score by April 1 of their PGY-2 year.
6. Fellows shall be graduates of an approved allopathic or osteopathic college of medicine and will have successfully completed an accredited ACGME/AOA-accredited internal medicine program, or equivalent residency program.
7. Residents/Fellows must be members of their appropriate specialty college, if required, and maintain that membership throughout their residency/fellowship.
8. Residents/Fellows must be appropriately licensed in the state of North Carolina.

GME POLICY 016: RESIDENT ELIGIBILITY, SELECTION AND APPOINTMENT

Resident applicants eligible for consideration for selection include the qualifications as outlined in Institutional Requirements published by the Accreditation Council for Graduate Medical Education (ACGME).

1. All PGY-1 residency and fellowship applicants will apply to Carolinas HealthCare System Blue Ridge Residency/Fellowship programs via the Electronic Residency Application Service (ERAS®).
2. All fellowship and PGY-1 positions will be filled via the National Matching Services, Inc. (NMS) and/or the National Resident Matching Program (NRMP), and those programs will comply with all rules and regulations of that body.
3. Each residency/fellowship program, using internal reviews and ranking policies appropriate to their program, will submit a ranking list of applicants to the DIO.
4. Each residency/fellowship program will exercise its recruitment and employment practices within the guidelines of Carolinas HealthCare System Blue Ridge without regard to race, color, age, religion, sex, national origin, veteran status, disability or handicap which are unrelated to job requirements.

In addition to the above, the following selection criteria must be followed for trainees requesting a residency position via a transfer:

1. Trainee candidates shall not have been out of medical school or residency training for more than 12 months; excluding military service. If trainee candidate is outside of the 12-month training period, exceptions must be approved by the GMEC committee.
2. No mid-year transfers will be accepted.
3. A formal letter must be submitted by the candidate documenting reasons for requesting the transfer.
4. A formal letter of good standing must be submitted by the trainees Program Director which shall include a list all rotations/dates successfully completed and/or failed.
5. A formal letter of reference from one of the trainee's current faculty member(s) must be submitted.
6. All USMLE/COMLEX exam scores shall be in compliance with the North Carolina Medical Board and ACGME standards. No more than one failure on each step is permitted. An official exam transcript must be submitted.
7. Patient encounter numbers and weeks of continuity clinic must be in compliance per ACGME standards, before the transfer is approved.
8. If trainee was in remediation, an explanatory letter from the trainees Program Director is required. The letter shall include reasons for remediation and successful remediation documentation.
9. If trainee was off-cycle, a letter of explanation must be provided.
10. Before accepting a resident transferring from another program, the program director must obtain written or electronic verification of previous educational experiences and a summative competency-based performance evaluation of the transferring resident. Letter must be provided by the program director.
11. Upon completion and receipt of the above criteria, the Program Director will recommend appointment of the transferring applicant to the DIO and the GMEC for final approval.

Carolinas HealthCare System Blue Ridge Block Diagram

Block	1	2	3	4	5	6	7	8	9	10	11	12
Site	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 2
Rotation Name	GIM Wards	GIM Wards	GIM Wards	GIM Wards	ICU	ER/night float	ER/night float	Ambulatory Medicine	GI	Elective*	Cardiology	Endocrinology
% Outpt	10	10	10	10	0	50	50	100	50	NA	50	100
%Research												

PGY1 Block Diagram

Block	1	2	3	4	5	6	7	8	9	10	11	12
Site	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 2
Rotation Name	GIM Wards	GIM Wards	Inpatient/NF	Inpatient/NF	Cardiology	ICU	Elective*	Nephrology	Infectious diseases	Ambulatory Medicine	Amb Med Geriatrics	ICU
% Outpt	10	10	5	5	50	0	NA	50	75	100	100	0
%Research												

PGY2 Block Diagram

Block	1	2	3	4	5	6	7	8	9	10	11	12
Site	Site 1	Site 1	Site 1	Sites 3/1	Site 2	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1	Site 1
Rotation Name	GIM Wards	Inpatient/night float	Inpatient/Night float	Rheumatology/Ambulatory elective	ID	Heme/Onc	Neurology	Outpatient pulmonology	ICU	Ambulatory medicine	Elective*	Elective*
% Outpt	10	5	5	100	50	100	50	100	0	100	NA	NA
%Research												

PGY3 Block Diagram

Continuity Clinic

1. Residents have continuity clinic during every rotation except ICU and during 2 weeks of Inpatient/NF (they have 2-3 clinics during this 1 month block)
2. Residents have between 44 weeks of continuity clinic per year, at minimum

*Available rotations include all IM subspecialties, Urology, ENT, Ophthalmology, Surgery, Clinic, Research, Administration, Private General Internal Medicine, Sports Medicine, Dermatology, Behavioral medicine, Pain Management, Hospice/Palliative Care, Radiology, Anesthesia

CME POLICY 019: PROFESSIONAL LIABILITY INSURANCE

1. Carolinas HealthCare System Blue Ridge provides residents/fellows with professional liability coverage, including legal defense and protection against awards from claims reported or filed during participation in each of its ACGME accredited programs, or after completion of the program(s) if the alleged acts or omissions of a resident/fellow are within the scope of the program(s).
2. Carolinas HealthCare System Blue Ridge will provide official documentation of the details of liability coverage upon request of the individual and during the applicant interview process.

GME POLICY 043: RESIDENT/FELLOW SCHOLARLY EXPENSE ALLOWANCE

1. Residents are allowed a total of \$5,100 over a 3-year residency period for scholarly activities. The \$5,100 is divided over each academic year and the funds are available July 1, through June 30, as listed below.
 - PGY-1: \$1,000 plus allowance to cover purchase of required textbooks ordered by GME and deducted from residents CME allocation
 - PGY-2: \$1,700
 - PGY-3: \$2,400
2. Fellows are allowed a total of \$7,200 over a 3-year fellowship period for scholarly activities. The \$7,200 is divided over each academic year and the funds are available July 1, through June 30, as listed below. If the fellowship is 1-year in duration, the PGY-4 allowance will be provided.
 - PGY-4: \$2,400
 - PGY-5: \$2,400
 - PGY-6: \$2,400
3. No annual allotment is to exceed the limits for an individual resident or fellow. The annual allotment is based on academic year not calendar year. The annual total allotment cannot be exceeded for the combination of all scholarly expenses.
4. The Designated Institutional Official (DIO), or designee, is responsible for ensuring compliance with the maximum reimbursement for each resident/fellow. A programmatic tracking system is required to reconcile these expenses annually.
5. The DIO, or designee, is responsible for periodically auditing the individual residency/fellowship program tracking systems.
6. If the funds are used for travel to educational offerings, the CHS Blue Ridge Travel Policy must be followed to acquire approval and to reconcile each claim for expense reimbursement. The policy must be followed in order to obtain reimbursement.
7. **Meals and Beverages:** Per policy, CHS Blue Ridge shall reimburse the reasonable cost of meals during the course of activities associated with approved travel. Meal expenses shall be reviewed for reasonableness and must be supported with detailed receipts. Meal expenses over and above the limits set below may be at the expense of the traveler.
 - a. Maximum meal reimbursable amounts: \$25 breakfast, \$25 lunch, \$50 dinner
 - b. CHS Blue Ridge shall reimburse reasonable gratuities, not to exceed 20%, for meal service
 - c. Alcohol will not be reimbursed
8. **Lodging:** As per CHS Blue Ridge Travel and Business-Related Expenses policy, unless convention room rates apply, the arrangements for lodging shall be as economical as possible.

9. With GME approval, residents/fellows may use their CME allotment for:
 - a. Travel and registration expenses associated with approved medical educational offerings
 - b. Medical texts and periodicals
 - c. Medical software applications
 - d. Medical professional membership dues
 - e. Medical journal subscriptions
 - f. Medical equipment such as stethoscopes (\$200 toward purchase), OMT table (\$300 toward purchase), iPad for Canopy use (\$500 toward purchase). These items are limited to onetime purchase during residency/fellowship period.
 - g. USMLE Step 3/COMLEX Step 3 board exams reimbursed by GME with a passing score. Exams must be taken and passed within the first year of residency consistent with House Staff Agreement.
 - h. Internal Medicine/Family Medicine specialty board certification exams only for entering PGY-4 fellows and taken during the PGY-4 year.
10. Annually, Residents/Fellows with Program Director approval may apply to the DIO for additional funds via the Scholarly Expense Application, up to \$1,000, to be used for scholarly presentation expenses. These funds are made available once the trainees CME balance has been exhausted.
 - a. Additional resident funds are intended to be used for scholarly research and academic podium and poster presentations.
 - b. Expenses accrued by fellows during attendance at program required specialty training courses are covered as a CME expense. Fellows may apply for up to \$1,000 via the Scholarly Expense Application for such required courses if their CME balance has been exhausted.
11. Use of allotment for scholarly expenses must be in accordance with CHS Blue Ridge and GME travel and reimbursement policies.
12. **Refer to GME policy 012.** Resident Vacation and Leaves of Absence regarding time off for educational meetings.
13. It is not required that each resident use the entire annual allowance. Any unused annual funds cannot be carried over to the next academic year.
14. Specific exclusions to this policy include equipment purchases over \$500, any computer hardware, smart phones, hand-held devices, and audio/video recording devices, e.g. digital cameras.

APPOINTMENT TO HOUSE STAFF AGREEMENT

This Appointment to House Staff Agreement (this “**Agreement**”) is entered into as of <<Enter Contract Effective Date>> by and between **BLUE RIDGE HEALTHCARE SYSTEM, INC.** (“**BRHC**”) and <<Enter Resident Name>> (“**Resident**”). *Institutional Requirement IV.B; IV.B.1*

Statement of Purpose

BRHC desires to appoint Resident as a member of BRHC’s House Staff participating in BRHC’s graduate medical education resident training program (the “**Program**”) and Resident desires to accept such appointment, on the terms and conditions set forth in this Agreement.

In consideration of the foregoing, the mutual agreements contained herein, and other good and valuable consideration, the receipt and sufficiency of which are hereby acknowledged, the parties agree as follows:

Duration of Appointment *Institutional Requirement IV.B.2.b)*

1. **Appointment and Term.** Subject to the terms and conditions of this Agreement, BRHC hereby appoints Resident as a member of BRHC’s House Staff and assigned to the department of <<Enter Department>> (“**Program**”) and Resident desires to accept such appointment, commencing on <<Enter Contract Effective Date>> (first day of Orientation), or such later date that the conditions precedent set forth in Section 12 have been met, and ending on **June 30**, <<Enter Year>> (the “**Term**”), unless earlier terminated pursuant to Sections 14 and 15.

Financial Support *Institutional Requirement IV.B.2.c)*

2. **Salary.** BRHC shall provide to Resident an annual salary of <<Enter Salary>> payable in biweekly installments in accordance with BRHC’s customary payroll practices. The annual salary may be increased by BRHC from time to time. BRHC may withhold from any amounts payable under this Agreement such federal, state, and local taxes or other amounts required to be withheld pursuant to applicable law.

Benefits, Professional Liability Insurance, and Leaves of Absence *Institutional Requirement IV.B.2.f); IV.B.2.g); IV.B.2.h); IV.B.2.i); IV.B.2.j); IV.G.1; IV.G.2*

3. **Benefits.** During the Term, in accordance with standard employee benefits package BRHC shall provide Resident with health and dental insurance, life and disability insurance, and professional liability insurance, including a reporting endorsement (tail coverage) in accordance with BRHC’s House Staff Policy “**#019 Professional Liability Insurance.**” BRHC shall also provide Paid Time Off (PTO) leave of absence benefits in accordance with BRHC’S House Staff Policy “**#012 Resident Vacation and Leaves of Absence**”. Under qualifying circumstances, residents/fellows have the option of receiving an extension through the Family Medical Leave Act (FMLA) or other approved leaves of absence(s). Any leave of absence may impact the criteria for satisfactory completion of the program and may impact the resident’s/fellow’s eligibility to participate in examinations by the relevant certifying board(s). In order to meet the requirements of length of training, an extension or “make up time” at the end of the residency/fellowship period will follow the appropriate Residency Review Committee guidelines, relevant certifying board certification requirements, and will be discussed with the resident/fellow at the initiation of their leave or as soon as the information is available.

Counseling and psychological support services are provided in accordance with BRHC's House Staff Policy **"#010 Counseling and Psychological Support of Residents,"** in each case, as generally made available to similarly situated employees of BRHC from time to time. Health, dental, life and disability insurance as well as professional liability insurance shall begin on the first day of the Term. Other benefits shall be provided in accordance with BRHC employment policies and procedures and are defined in the BRHC Policy and Procedure manual.

Vacation & Continuing Medical Education Institutional Requirement IV.B.2.i)

4. Vacation and Continuing Medical Education. Resident shall be entitled to twenty (20) days for vacation and continuing medical education during the Term. Such vacation and continuing medical education days must be scheduled with the chief resident of the Program and otherwise taken in accordance with BRHC's House Staff Policy **"#012 Resident Vacation and Leaves of Absence."** Vacation or continuing medical education days not taken during the Term may not be carried forward and shall expire if not used during the Term. No additional payments shall be made to Resident for vacation or continuing medical education days not taken upon termination of this Agreement or otherwise.

Duty Hours & Supervision Institutional Requirement IV.B.2.l)

5. Duty Hours and Call Schedules. Resident shall perform his or her duties under this Agreement during such hours as the Program Director may direct in accordance with BRHC's House Staff Policy **"#007 Resident Duty Hours,"** applicable federal, state and local laws, rules, regulations and policies, and Accreditation Council for Graduate Medical Education ("ACGME") requirements. If a scheduled duty assignment is inconsistent with such policies, laws, rules, regulations or requirements, Resident shall bring such inconsistency to the Program Director as soon as possible who shall take the necessary steps to reconcile or cure such inconsistency.

6. Moonlighting. Moonlighting is defined as working for compensation in addition to performing the regular duties as a resident at BRHC. Moonlighting is not encouraged, but may be permitted when in compliance with BRHC's House Staff Policy **"#006 Moonlighting."**

7. Faculty Responsibilities and Supervision. BRHC will provide, to the best of its ability, appropriate faculty supervision of Resident at all levels of training to ensure that Resident provides safe and effective care and ensure that Resident is not subjected to responsibilities beyond his/her capabilities.

Obligations & Accommodations Institutional Requirement IV.B.2.k)

8. Obligations of BRHC. During the Term, BRHC shall use its best efforts, with available resources, to provide an educational training program and environment that meets the applicable ACGME accreditation standards. In addition, BRHC shall provide Resident with appropriate meals and sleeping quarters during such times as Resident is taking formal night call, laboratory coats, laundry service for laboratory coats, and parking. BRHC will provide to the Resident all information related to his/her eligibility for specialty board examinations.

9. Accommodation for Disabilities. BRHC will comply with all legal obligations to Residents with disabilities. Procedures for accommodations are set forth in the Carolinas HealthCare System Policy (PR 150.01) entitled **"Individuals with Disabilities."**

10. Harassment and Discrimination. BRHC will not tolerate harassment or discrimination. For further details, see BRHC's House Staff Policy **"#025 Harassment,"** and BRHC's Human Resource Policy entitled **"Harassment."**

11. Certain Obligations of Resident. During the Term, Resident shall do the following:

- a. Participate fully in the educational and scholarly activities of BRHC's residency training program;
- b. Use his or her best efforts to provide safe, effective, and compassionate patient care and present at all times a courteous and respectful attitude toward all patients, colleagues, employees and visitors at BRHC and its facilities;
- c. Provide clinical services commensurate with his or her level of advancement and responsibilities under appropriate supervision under circumstances and at locations covered by BRHC's professional liability insurance maintained for Resident;
- d. Abide by all applicable federal, state and local laws, rules, regulations and policies, including the North Carolina Medical Board, as applicable, and other appropriate governmental agencies and departments and by the standards required to maintain accreditation by ACGME, the Residency Review Committee and the Joint Commission on Accreditation of Healthcare Organizations and any other relevant accrediting, certifying, or licensing organization, including the legible and timely completion of patient medical records, charts, reports, statistical operative and procedure logs, evaluations, and other documentation required by such agencies and organizations;
- e. Abide by all applicable rules, regulations, bylaws, policies, practices, and procedures of BRHC, its clinical departments and its facilities and the Medical Staff as in effect from time to time, including the House Staff Policies. A copy of the House Staff Policies in effect as of the date hereof have been provided to Resident as part of the contract package and Resident hereby acknowledges that he or she has read and understands such policies;
- f. Submit to drug screens pursuant to BRHC's pre-employment, random, and reasonable suspicion drug screening program for its employees;
- g. Refrain from taking any action or making any statements with the intention or effect of disparaging the goodwill or reputation of BRHC or its affiliates;
- h. Take the USMLE Step 3 and/or the COMLEX Step 3 exam prior to the end of the first year of the Term; and
- i. Furnish such further information, execute, and deliver such other documents, and do such other acts and things, in each case as BRHC reasonably requests at any time for the purpose of carrying out the intent of this Agreement.

12. Conditions Precedent to Effectiveness. This Agreement shall become effective on the date that each of the following conditions has been satisfied:

- a. The Designated Institutional Official of BRHC shall have received **(i)** a completed ERAS common application form, including an official medical school transcript, and proof of satisfactory completion of COMLEX 1, II (CE and PE) and/or USMLE Step 1, Step 2 (CK and CS); **(ii)** a copy of the Resident's medical school diploma; **(iii)** proof of legal employment status (*i.e.*, birth certificate, passport, naturalization papers, valid visa, etc.); **(iv)** a copy of a resident training license or full/unrestricted license (as required by BRHC) in Resident's name from the North Carolina Medical Board, as applicable;
- b. Resident shall have submitted to a pre-employment drug screen under BRHC's pre-employment drug screening program and such drug screen shall have been negative;
- c. Resident shall have active certification in the relevant life support course or courses (*i.e.*, Basic Life Support, Advanced Cardiovascular Life Support, Pediatric Advanced Life Support); and
- d. Resident shall have complied with all other pre-employment requirements of BRHC and that are generally applicable to similarly situated residents and employees.

Grievance Procedures & Due Process *Institutional Requirement IV.B.2.d); IV.B.2.e)*

13. Reappointment and Promotion to Subsequent PGY level. Resident will be monitored and counseled regarding his or her status within the Program, including whether or not he or she is on track to reach the milestones as set by the Program. If the milestones are met in each of the six competencies, Resident shall be appointed to the next PGY level for a subsequent term. If milestones are not reached, BRHC may take corrective action, up to and including suspension or termination in accordance with policy “#008. Reappointment and Promotion to a Subsequent PGY Level” and policy “#009 Residency Remediation, Grievance, Suspension, Dismissal & Appeals.”

14. Grievance & Termination. This Agreement is subject to termination prior to expiration of the Term in accordance with BRHC’s House Staff Policy “#009 Residency Remediation, Grievance, Suspension, Dismissal & Appeals” as follows:

- a. By BRHC due to Resident’s failure to comply with the terms of this Agreement, substandard or unsatisfactory performance, unprofessional or illegal conduct (including a positive drug screen pursuant to BRHC’s policy), debarment or exclusion from federal program participation, or conduct disruptive to the operation of BRHC, its affiliates, or the Program; or
- b. By Resident upon thirty (30) days prior written notice.

15. Effect of Termination. If this Agreement is terminated prior to the expiration of the Term or if this Agreement is terminated as a result of the expiration of the Term, Resident shall be entitled to receive the compensation and benefits earned through the effective date of termination. Except as expressly provided above or as otherwise required by law, BRHC shall have no obligations to Resident in the event of the expiration or termination of this Agreement for any reason. BRHC shall comply with the obligations imposed by state and federal law and regulations to report instances in which Resident is not reappointed or is terminated for reasons related to alleged mental or physical impairment, incompetence, malpractice or misconduct, or impairment of patient safety or welfare.

Professional Liability Insurance *Institutional Requirement IV.B.2.f)*

16. Litigation Support. If BRHC is investigating, evaluating, pursuing, contesting or defending any incident, proceeding, charge, complaint, claim, demand, notice, action, suit, litigation, hearing, audit, investigation, arbitration or mediation, in each case whether initiated by or against BRHC (collectively, “*Proceeding*”), Resident shall cooperate with BRHC and its counsel in the evaluation, pursuit, contest or defense of the Proceeding and provide such testimony and access to books and records as may be necessary in connection therewith. If the Resident or anyone with whom the Resident works receives, on his/her behalf, any summons, complaint, subpoena, or court paper of any kind relating to activities in connection with this Agreement or the Resident’s activities at BRHC or its facilities, the Resident agrees to immediately report this receipt and submit the document received to BRHC’s Office of the General Counsel. This section 16 shall survive termination of the Agreement.

17. Miscellaneous.

- a. All paragraph and item headings are inserted for convenience only and do not expressly or by implication limit, define, or extend the specific terms of the section so designated. The word “including” in this Agreement means “including without limitation.” All words in this Agreement shall be construed to be of such gender or number as the circumstances require.
- b. This Agreement contains the entire understanding of the parties and shall be amended only by written instrument signed by both parties.
- c. This Agreement shall be governed by and interpreted under North Carolina law, without

giving effect to the conflict of laws provisions thereof. Venue for any claims arising under this Agreement shall be a court of competent jurisdiction sitting in Burke County, North Carolina.

- d. Whenever a notice is required to be given in writing under this Agreement, such notice shall be given by certified mail, return receipt requested, and returned to the respective party at his or her last known address.
- e. Neither party may assign its rights or delegate its obligations hereunder without the prior written consent of the other party.
- f. The failure by either party to promptly exercise a right hereunder or to seek a remedy available hereunder because of a breach of this Agreement shall not be construed as a waiver of that right or a waiver of any remedy for that breach or any future breach of this Agreement.
- g. Nothing in this Agreement shall be construed as creating or giving rise to any rights in any third parties or any persons other than the parties hereto.

IN WITNESS WHEREOF, the parties hereto have executed and delivered this Agreement as of the date first written above.

RESIDENT: _____ **DATE:** _____

Name: _____

BRHC: **BLUE RIDGE HEALTHCARE SYSTEM, INC.**

By: _____

Name: Kathy C. Bailey

Title: President and Chief Executive Officer

By: _____

Name: Anthony J. Frank, MD, MBA, FACEP, CPE

Title: Designated Institutional Official



Carolina's HealthCare System
Blue Ridge