

Adult Outpatient Medicine Scope of Work - Permanent positions. Stability of providers is a primary goal. Minimum 1 year assignment starting as soon as possible, normally 2 years - Board certification required, or board eligible within 5 years of residency - Must be IM or FP trained (U.S. residency) - Malpractice coverage is provided under the Tort Claims act - ACLS/BLS required - Procedures not required (encouraged with proctoring available if requested) - Average of 6-10 established patients. No preassigned panels – providers start with walk-ins and new patients, typically hospital discharges with no PCP, you will create your own “panel” quickly - Minimal specialty backup (full-time: general surgery, nephrology, anesthesia, and OB-GYN) (part-time: GI 2-wks/mo, IR 1-day/mo) - EHR is RPMS (essentially the same as VistA at VA hospitals) - Schedule: Contract specifies 40 hrs/week, M-F 0800 to 1600 hrs. Plans are being formulated for extended clinic hours which would be filled within the 40 hr contracted duty time.