

Sample Re-Entry Plan. *This plan is not meant to be all inclusive nor are all listed items mandatory. Your circumstances may require additional re-entry plan elements. Also refer to the Re-entry Plan Content Guidelines for License Applicants.*

This plan includes the acknowledgement of Dr. _____, accepting responsibility of mentoring my re-entry into clinical practice. I have provided a copy of this plan to Dr. _____ for review. He/She acknowledges this plan, accepts responsibility for mentoring my re-entry into clinical practice, and supports this re-entry plan.

My previous clinical work included: (brief description of practice sites and clear statement of most recent practice scope, hours, volume, acuity, setting, description of supervision, other,) my future plans include: (description of future plans for practice :scope, hours, volume, acuity, setting, description of supervision, other.)

Please find below my proposed reentry plan with the following structure:

- A. Current qualifications (strengths and weaknesses).
- B. Clinical and procedural skills goals to be developed and monitored
- C. Reentry plan elements with milestones

A. Current qualifications

1. Certification, recent clinical activities, status of medical licensure:
2. Continuing medical education over past two years:
3. Using the language of the core competencies, my current areas of strength are:
4. Using the language of the core competencies, my current areas of weakness, which will be addressed during my re-entry to practice, are:

B. Goals are to reestablish my knowledge, skills, and confidence in clinical practice to so that I may function as an independent practitioner. I will gradually expand my scope of practice to include new skills, increasing complexity and responsibility of patient care as deemed appropriate by my mentor within the context of:

Professionalism: I will continue to uphold high standards of professionalism by respecting patient privacy respect and treat patients with honesty, concern, and empathy.

Patient Care: I will work to develop my skills efficiently and effectively. I will develop my ability to provide appropriate documentation in the medical record.

Practice-based learning: I will develop on-line resources for continuing education that will help me address patient treatment plan needs in my practice.

Specific goals will include:

1. Gain confidence and feel comfortable with my assessments and plans.
2. Expand my knowledge and practicing skills in the field of _____ by reviewing literature specific to the patients seen.
3. Skills will include: (these may be different for each re-entry candidate):
 - a. History and physical examinations.
 - b. Diagnostic plan development including appropriate ancillary test ordering
 - c. Generation of relevant differential diagnoses
 - d. Development of treatment plans
 - e. Procedural skills to include: _____
4. Focused practice-based learning and CME derived from items 1. – 4. and mentor input.
5. Maintenance of a educational and case log documenting all topics and cases discussed with my mentor.

C. Reentry Plan Elements:

Overview

I will be working with Dr. _____ as a re-entry physician candidate, in the practice of _____. All patient care will take place in the (outpatient/inpatient/office) setting. There will be (no) in-patient or hospital care. (If there is to be in-patient care it should be described in detail) There will be (no) on-call responsibilities. (If there are to be on-call responsibilities they should be described in detail). This is a (primary care) setting with (both pediatric and adult) patients. I will be caring for patients with (minor acute illness and following patients with chronic illnesses such as diabetes and hypertension). I will apply for professional liability insurance from _____. During all phases of my re-entry plan I will undertake the following CME and educational activities:

Phase 1: Observation of Dr. _____ in clinical practice:

For _____ weeks/months I will only observe patient care delivered by Dr. _____. I will observe Dr. _____ a minimum of ___ hours a day, _____ days a week. It is expected that during this phase I will observe Dr. _____ provide care to ___ patients. During this phase I will review (describe type of focused CME) for the patients' illnesses, and discuss with Dr. _____ appropriate testing and procedures. I will review Dr. _____'s diagnosis, assessment, and treatment plans and discuss these with him/her. The goals of this phase of observation are _____. Dr. _____ will monitor my progress towards my goals during this phase by (discussion, observation, other). At the end of this phase Dr. _____ will submit a letter to the Board, using the language of the core competencies and outlining my progress and specifically stating whether I have met the goals of this phase and that I am ready to progress to Phase 2.

Phase 2: Patient care under the Dr. _____ direct supervision:

This phase will last a total of _____ months. *What is suggested to the applicant is to have phase 2 progress in accelerated fashion, starting with low volume and acuity and progressing as appropriate:* For _____ weeks/months Dr. _____ will observe me for _____ hours of patient care each week. I will perform all patient evaluations and assessments under the direct supervision of Dr. _____. I expect to see _____ patients per day. All pertinent aspects of my patient care and my records will be reviewed by Dr. _____ prior to the patient's discharge during this time.

Following the initial phase above I will present to Dr. _____ all patients that I see without his/her direct observation and Dr. _____ will review all patient records of patients that I see prior to the patient's discharge. I will see no more than ___ patients an hour.

For _____ weeks/months Dr. _____ will observe my patient care for _____ hours a week and review all my patient charts in a standard of care type audit. I will see no more than ___ patients a day and present to Dr. _____ all new patients, those with chronic disease, those with an acuity level of 3-4 (out of 4), and all patients with an illness that I have not previously seen during the earlier phases of my re-entry.

At the end of each week I will meet with Dr. _____ for ___ hours and review appropriate cases. During this phase I expect to see a total of _____ patients. Dr. _____ will provide a letter using the language of the core competencies to the medical board when phase 2 is complete. He will state that he/she directly witnessed my practice, and he will provide a detailed statement with regard to whether I have met the goals of this phase and whether he agrees or disagrees with moving to phase 3. If he does not agree that I am prepared to move to phase 3, I will submit a plan to extend phase 2 with Dr. _____ approval.

Phase 3: Independent supervised patient care.

Dr. _____ will monitor progress during this phase by _____. For _____ months I will independently take the history, perform the physical exam, and prepare the assessment and plan. I will present to Dr. _____ any new patients, those with at high acuity or those with the diagnosis that I have not reviewed before. Dr. _____ will continue to review any cases of interest. At the end of this phase Dr. _____ will provide a summary approval letter to the medical board reviewing my skills in the 6 core competencies and other items as deemed appropriate, including my technical mastery of any procedures.

Applicant signature and date

Mentor signature and date