

PGME PROGRAM ADMINISTRATOR CHECKLIST FOR COMPLETING A NEW ROTATION FORM

SUMMARY

To successfully complete the **New Rotation Form via Qualtrics**, you will need to ensure that you have the following information available. You may need to follow up with your Program Director or manager to confirm certain rotation details. This information is **required from your program** and is not information the Education Systems Team can provide.

ONE45 GROUP NAME (MANDATORY)

- Ensure you know your exact **One45 Group Name** where you need the rotation added. This group name must follow this format and represents your program/site - PG-Department-Specialty-Site

ROTATION CATEGORY (MANDATORY)

- **Identify the appropriate rotation category:**
 - **Full Time:** Rotation that involves a standard number of hours per week. (is there a minimum amount this can be?)
 - **Longitudinal:** Rotation that spans over a long period of time, running concurrently with core and other rotations throughout the academic year.
 - **Simultaneous:** Rotation scheduled at the same time as another rotation or that share some of the same dates.
 - **Placeholder:** Temporary shell rotation used to indicate the type of rotation, which will be updated with details once finalized.
 - **Research:** Rotation focused on research (non-clinical).

TIME SPENT ON ROTATION (MANDATORY)

- **Provide the number of days per week** the resident will spend on this rotation, where a week consists of **5 working days**.

CLINICAL SPECIALTY (MANDATORY)

- **Confirm the clinical specialty** of the faculty or program teaching rotation.

Note: This information can be cross-checked with the **Clinical Specialty List**

ROTATION DETAIL (OPTIONAL)

- **Provide any distinguishing details** for this rotation that help differentiate it from other rotations. This is optional but can be helpful. Do not use abbreviations.

PRIMARY AND ALTERNATE CLINICAL LOCATIONS (MANDATORY)

- List **all clinical locations** where residents will spend time during the rotation.
- There must be a **Primary Location**
- Consider if any rotation requires **call duties** or specific **access to locations** (e.g., emergency room, hospital wards).
- For rotations that occur outside of a location specified in the Clinical Location list, we need to identify information as follows:
 - **Out of Province (OOP)**: Must specify the **province**
 - **Out of Country (OOC)**: Must specify the **Country**
 - **Private Practice/Office (PPO)**: Must specify the **city** where the PPO is based.

Note: This information can be cross-checked with the **Clinical Location List**

TIME AT EACH LOCATION (MANDATORY)

- **Provide the time** that will be spent at each location as a **percentage of the 5-day work week** (e.g., 60% at Primary Location, 40% Alternate Location).

ROTATION TYPE (OPTIONAL)

- **Rotation Type** (e.g., Core, Elective, Selective)

ROTATION NAME

- The system will **auto-generate the name** of the rotation based on your selections (rotation category, specialty, etc.) so you are not required to provide a suggested name.