



Procedure Title:	Resident Credentialing Procedure for Springfield Residents
Owner:	
Department:	GME
Origination Date:	11/15/2019
Last approved date:	9/19/2025
Approved By:	Graduate Medical Education Committee

I. Scope

This procedure was developed for SIU Medicine. SIU Medicine collectively applies to the SIU School of Medicine (SIU SOM), including the Federally Qualified Health Center (FQHC), and SIU HealthCare (SIU HC). These entities are collectively referred to as SIU in this document.

This document applies to SIU staff, faculty, trainees, agents, officers, directors, interns, volunteers, contractors, and any other individual or entity engaged in providing teaching, research and health care items and services at SIU. These individuals are collectively referred to as SIU personnel in this document.

II. Definitions

The term “resident” is inclusive of all trainees at SIU SOM, whether training in a residency or fellowship program. The term “program” is inclusive of all SIU residency or fellowship programs, whether accredited or non-accredited.

III. Purpose

The Medical Staff, Administration, and Governing Boards of Springfield Memorial Hospital and HSHS St. John’s Hospital (hereinafter referred to as Affiliated Hospitals) have overall responsibility for the quality of professional services provided by individuals with clinical privileges. Resident physicians have certain privileges delineated by the Affiliated Hospitals as recommended by SIU School of Medicine. The resident physicians receive their compensation and professional liability insurance from the Affiliated Hospitals. Therefore, each Affiliated Hospital also has certain responsibility for verifying qualifications of the residents

IV. Procedure

An applicant’s credentials must be approved before they can be submitted to the National Resident Matching Program (NRMP) or before an employment contract can be offered. If an applicant has previously been in an accredited GME program, the Program Director is strongly encouraged to make personal contact with the program directors or other individuals able to evaluate the applicant’s performance at their previous training programs, and consult with the DIO before proceeding with credentialing. If an applicant has high risk indicators, the Program Director is strongly encouraged to consult with the DIO before proceeding with credentialing.

The following credentialing process is outlined to qualify new resident physicians for clinical privileges:

All applications must include the following:

1. Application for residency
2. Dean’s letter and/or official transcripts
3. At least three letters of recommendation
4. USMLE or COMLEX scores

Applications are screened by the program. Qualifications are set by each program, and applicants meeting those standards may be invited for an interview. Each program has a selection committee that ranks their applicants according to priority. Hospital department chairs are invited to attend this meeting.

After ranking possible candidates, the program director prepares a letter stating that the applicants have been through the interview process. The letter identifies candidates that are acceptable to the residency program and who have satisfactory credentials. A list of the names of all such acceptable candidates will be provided in the letter or on a separate applicant roster. (If a resident is being considered for an advanced level of training, refer to the policy on resident transfers for directions.) The application packet for each candidate is uploaded into a program specific Dropbox folder by the program along with the program director's letter and applicant roster if applicable.

After OGME staff has reviewed the credentialing materials for completeness, the Affiliated Hospitals are notified that the materials are available for their evaluation and approval and access is granted to the Dropbox folder. The Affiliated Hospitals' Department Chairs and Medical Staff Officer may review each file or accept the Program Director's letter that the credentials provided are satisfactory. The Hospital Department Chair or Medical Staff Officer indicates acceptance or rejection of the applicants as listed on the residency program director's letter or applicant roster, and then returns an approval form to OGME via email. OGME staff uploads the approval/s to the Dropbox folder and notifies the program coordinator when all required approval forms have been received. The credentialing process is complete at this time and programs can move forward with ranking the candidates and/or issuing a letter of offer.

V. References

Instructions for Credentialing

VI. Attachments

VII. Periodic Review

VIII. Reviewed by

Graduate Medical Education Committee

IX. Office of Responsibility

GME