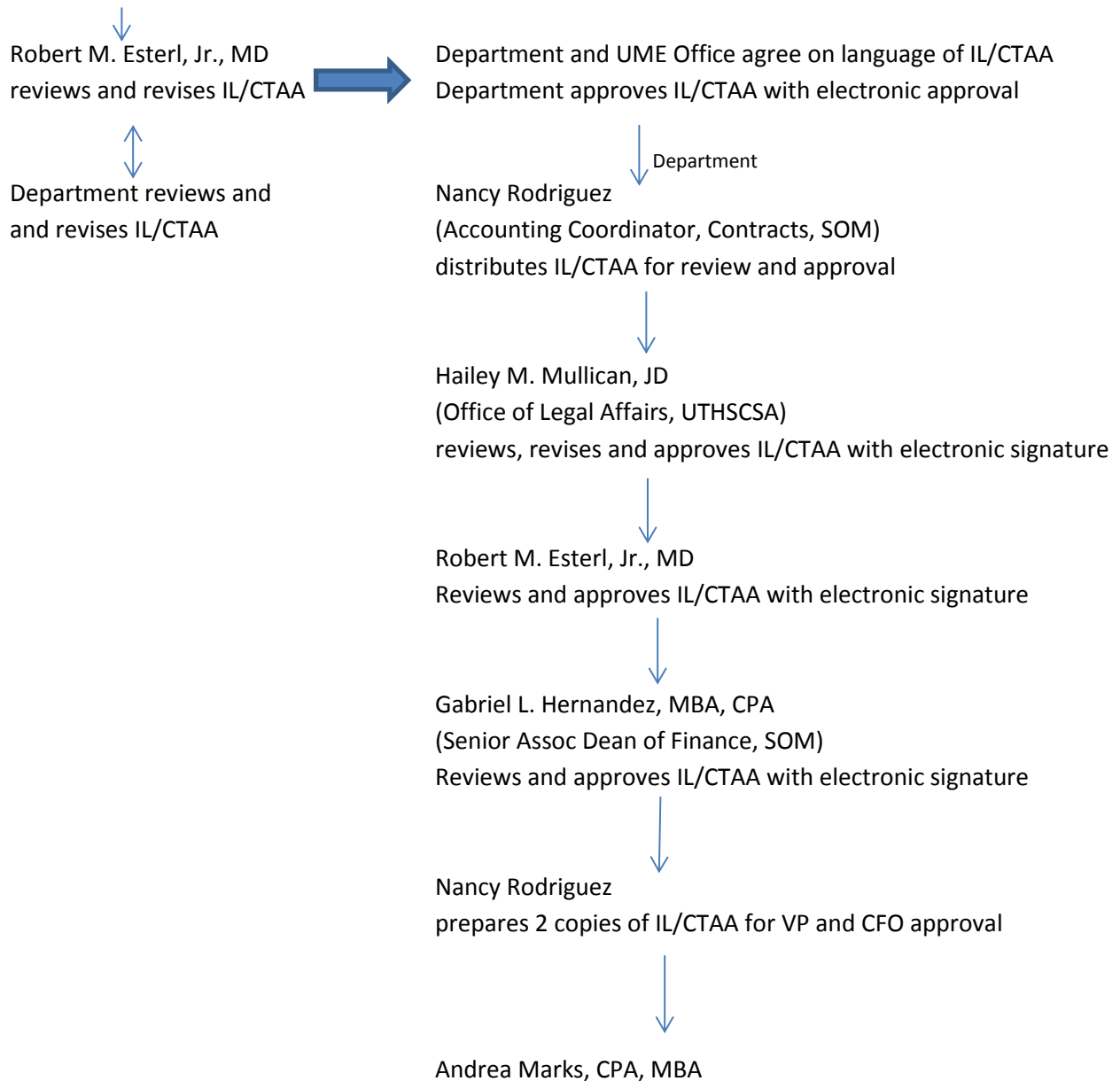


FLOWCHART FOR REVIEW and APPROVAL of CLINICAL TRAINING AFFILIATION IMPLEMENTATION LETTER (IL) and CLINICAL TRAINING AFFILIATION AGREEMENT (CTAA)

PROCESS

Department provides brief explanation of the purpose of the medical student educational experience/contract in a memo to Robert M. Esterl, Jr., MD (Assoc Dean for UME, SOM) including the following: Department information (department name and contact name, title, address, email, phone), contract term date, benefits for UTHSCSA, financial obligations, and Facility information (facility name and contact name, title, address, email, phone number).

Department uses and completes standard IL/CTAA template (found at UME website)



(Vice President and Chief Financial Officer, HSC)
signs 2 original copies of IL/CTAA



Nancy Rodriguez
sends 2 original copies of IL/CTAA by certified mail to Host Agency



Host Agency
signs 2 original copies of IL/CTAA
keeps 1 original copy of IL/CTAA and returns 1 original copy of IL/CTAA by certified mail to Nancy Rodriguez



Nancy Rodriguez
distributes IL/CTAA to several sites



Electronic copy
for Nancy Rodriguez's files
and OnBase

Electronic copy
for department files

Original copy
to Dr. Esterl