

**DUTY STATEMENT
CALIFORNIA DEPARTMENT OF VETERANS AFFAIRS**

PART A	
Position No: 573-301-7551-003	Date:
Class: Physician and Surgeon	Name:
Under general supervision of the Chief of Medicine, incumbent is responsible for examining and diagnosing patient illnesses and administration of medical treatment in the ambulatory care clinic, and Skilled Nursing Facility (SNF)/Intermediate Care Facility (ICF). Provide preventative health care maintenance when appropriate and perform other duties as required. Provider must be linked, through their National Provider Identifier (NPI), to their facility for Medicare, MediCal, and all other applicable insurance vendors.	
Percentage of time performing duties:	ESSENTIAL FUNCTIONS
40%	Examine and diagnose patient illness and administer medical treatment in urgent care, rehabilitation care, and long term care. Provide preventative health care maintenance when appropriate.
15%	Make rounds of assigned wards if applicable and review reports, record medication recaps, and progress of patients. Direct and attend Interdisciplinary Team conferences (IDT) and/or Resident Care Treatment Team (RCT) conferences.
10%	Maintain medical records and case histories, and prepare reports and professional correspondence. Initiate consultation and referral request and complete cost center accounting forms. Make appropriate phone call communications with patient family/relatives and outside medical consultants and facilities.
10%	Serve as Doctor on Call (DOC) when scheduled or when necessary mandated and perform other duties as required.
5%	Medical Staff Functions: Committee meetings, clinical and research projects, continuing medical education (CME), and other duties as required.
5%	Order and evaluate results of laboratory examinations, x-rays, EKG's, consultations, medications, treatments, procedures, and other diagnostic/therapeutic tests in accordance with evidence based quality of care.
5%	Attend and participate in staff conferences and case discussions of surgical medical and mental health patients. Instruct and supervise nurses, technicians, and personnel assigned for special training.
5%	Provider will complete appropriate charge slips for all resident visits in order for Veterans Homes to be reimbursed for services provided.
NON-ESSENTIAL FUNCTIONS	
5%	Other related duties as assigned.

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PART B - PHYSICAL AND MENTAL REQUIREMENTS OF ESSENTIAL FUNCTIONS					
Activity	Not Required	Less than 25%	25% to 49%	50% to 74%	75% or More
VISION: View computer screen; prepare and proofread various forms, reports, and documents; maintain medical records and case histories.					X
HEARING: Answer telephone; communicate with Administration, department managers, department staff, patients, relatives and outside medical consultants; receive verbal information.					X
SPEAKING: Communicate with Administration, department managers, department staff, patients, relatives and outside medical consultants in person and via telephone; interact in meetings.				X	
WALKING: Within the home to various units; make rounds.				X	
SITTING: Work station; examine patients; meetings; training.				X	
STANDING: Copy documents; review records.				X	
BALANCING:		X			
CONCENTRATING: Review documentation for accuracy and proper diagnosis; research medical histories and processes.					X
COMPREHENSION: Understand patient needs for preventative health care and appropriate diagnosis; medical terminology.					X
WORKING INDEPENDENTLY: Must be able to examine and diagnose with minimal guidance.					X
LIFTING UP TO 10 LBS:		X			
LIFTING 10-25 LBS:		X			
LIFTING 25-50 LBS:		X			
FINGERING: Push telephone buttons and computer keyboard.		X			
REACHING: Answer telephone; use a mouse; retrieve documents from printer.		X			
CARRYING: Transport documents.		X			
CLIMBING: Stairs.		X			
BENDING AT WAIST: Use copier; access low file drawers.		X			
KNEELING: Access low file drawers.		X			
PUSHING OR PULLING: Open and close file drawers.		X			
HANDLING: Sort paperwork; distribute mail.		X			
DRIVING: Special events.		X			
OPERATING EQUIPMENT: Computer, telephone, copier, printer, fax machine.		X			
WORKING INDOORS: Enclosed office environment; examination rooms.					X
WORKING OUTDOORS: Special events.		X			
WORKING IN CONFINED SPACE: File, supply, storage rooms, etc.		X			

I have read and understand the duties listed on this Duty Statement and I can perform these duties with or without reasonable accommodation.

Employee signature _____ Date _____

Supervisor signature _____ Date _____

Human Resources signature _____ Date _____

Revised: 07/20/17