

Resident Duty Hours Policy

Resident Duty Hours Requirements (as defined by the ACGME) Include:

1. *Supervision of Residents:* Residents must work with qualified faculty who provide continuous supervision and consultation. Faculty must recognize signs of excessive resident stress/fatigue and work to address this concern and prevent its recurrence.
2. *Duty Hours:* Must be limited to no more than 80 hours per week, averaged over four weeks, inclusive of in-house call activities. Residents must be provided, averaged over four weeks, 1 day in 7 free from all educational & clinical activities.
3. *In-House Call:* Must occur no more frequently than every third night, when averaged over four weeks, and must not exceed 24 hours. Residents may only remain on duty for up to 6 additional hours post call and may not be assigned any new patients during this time.
4. *Moonlighting:* Residents must be given permission to moonlight by the program director, who must assure that this activity does not interfere with their education. Moonlighting that occurs in one of the affiliated hospitals of the residency program must be counted toward the 80-hour weekly limit on duty hours.
5. *Oversight:* Monitoring of duty hours must be done by faculty and program leaders. Corrective action must be taken when excess work hours and/or excess resident fatigue is detected.

Inpatient Teaching Service Policy General Requirements Include:

1. Inpatient Teaching Services at BMC, IMMC & VAMC must comply with ACGME duty hours requirements. This policy is meant to clarify how these services will assure they are in compliance with these duty hour requirements.
2. Residents on all inpatient service rotations will be given, on average over four weeks, one day off each week during these rotations. During IMMC and VAMC rotations, when residents have Friday night call, they may round Saturday morning and have Sunday free of any clinical responsibilities. When residents have Sunday call, they will have Saturday free of clinical responsibilities. When they have Saturday call, they will be allowed to leave by 7:30 am the next morning and they will not be required to round or write notes on assigned patients prior to leaving the hospital Sunday morning. Residents will not return to the hospital to assume any clinical duties for 24 hours following a Saturday call, in order to ensure that they have a full 24 hours free from clinical duties. This means that the resident will return to the hospital no sooner than 7:30 AM on Monday. The resident is responsible for coordinating this with his or her fellow residents on the team and with the Attending Physician in order to ensure continuity of patient care. Residents with no Friday, Saturday or Sunday call assignments will round and write notes on assigned patients either Saturday or Sunday morning, as determined with their attending staff physician at IMMC, or as listed on the official weekend rounding schedule at VAMC.
3. Residents on inpatient service rotations will not be required to attend continuity clinic on their post-call day. Call rotations and/or clinic days may be rearranged to address this conflict and assure each resident's maximum participation in continuity clinic training.
4. Residents on inpatient service rotations will not be assigned new patient admissions on the day post-call. They are allowed to see and write notes on previously assigned patients, participate in didactic activities, and arrange transfer care of patients. They will

be allowed to leave the hospital by 1:00 – 1:30 p.m. after signing out their patients to the intern or resident covering these patients on call that day.

Residents must assure that they do not seek to change the call schedule in ways that conflict with requirements to control stress and limit duty hours, call frequency, and post-call restrictions on duty hours and assignment of new patients.