

Maternal Fetal Medicine

Resident and Fellow Work Hours Policy

Applies to: Post-Graduate Trainees

Policy: To maintain working conditions and work hours of physicians and post-graduate trainees (Resident and Fellows) that promote the provision of quality medical care. University Hospital shall follow the policies as set forth in New York Department of Health Code 405, regarding working hours for post-graduate trainees and certain members of the medical staff. In addition, post-graduate trainee programs must be in compliance with ACGME specialty-specific duty hour regulations.

Unless otherwise specified the term “Resident” in this document refers to any post-graduate trainee.

1. Schedules of post-graduate trainees with inpatient care responsibilities shall meet the following criteria:
 - A. The scheduled work week shall be the maximum of 80 hours per week over a four-week period (inclusive of all in-house clinical and educational activities, clinic assignments, clinical work done from home, and all moonlighting activities).
 - B. In determining limits on working hours of post-graduate trainees as set forth in Code 405, the medical staff shall require that all Residents must have 8 hours off between scheduled clinical work/educational periods. Residents must have at least 14 hours free of clinical work and education after 24 hours of in-house call.
 - C. Post-graduate trainees must have 24 hours off per week not averaged. At-home call cannot be assigned on the 24 hours off.
 - D. Maximum on-call frequency is every 3rd night averaged over four weeks.
 - E. E. Continuous on-site duty, including in-house call, must not be scheduled for/exceed 24 consecutive hours. Residents may remain on duty for up to 3 additional hours (total of 27 hours) of transition time to be used for transfer of patient care, rounds or grand rounds. No new patient care may be assigned during the 3-hour transition. Transition time may not be scheduled. If a Resident exceeds 24 hours of continuous duty, the resident must document the reason for remaining to care for a patient in writing to his/her Program Director. The additional time worked will be counted into the 80-hour work limitation.
 - F. Time spent on patient care activities when on “at-home” is counted toward the 80-hour limit. At-home call cannot be scheduled on the day that satisfies the day off per week. “On-call” duty taken onsite at the hospital does count as time worked, with the limited exception for surgical trainees provided for in a Section 2 of this policy below.
 - G. When assigning responsibilities to post-graduate trainees, the supervising physician will take into account work hour constraints, particularly as the duration of their own on-duty assignment progresses.
 - H. Night float must occur within the context of the maximum work hours per week, mandatory weekly time off, and mandatory time off between work periods. The maximum number of consecutive weeks of night float and maximum number of months of night float per year may be further specified by each program’s ACGME Residency Review Committee (RRC).

- I. Please refer to ACGME specialty-specific duty hour regulations for additional requirements. Night float must occur within the context of the maximum work hours per week, mandatory weekly time off.
2. Night Shift On-Call for Surgery Trainees
 - A. "On-call" duty in the hospital during the night shift hours by trainees in surgery will not be included in the 24-consecutive-hour limit contained in clause 1(B) and the 80-hour limit contained in clause 1(A) if, and only if:
 1. The Administrative Resident documents that during the on-call night shift, the post-graduate trainee was generally resting and that interruptions for patient care were infrequent and limited to patients for whom the post-graduate trainee has had continuing responsibility. The post-graduate trainee must have received at least 4-5 hours of uninterrupted sleep during the on-call shift at the hospital;
 2. Night-shift duty in the hospital is scheduled for each trainee no more often than every third night;
 3. A continuous assignment that includes night shift "on-call" duty is followed by a non-working period of no less than 24 hours.
 - B. Trainees will be immediately relieved from a continuing assignment when fatigue due to an unusually active "on-call" period is observed. It is the responsibility of the trainee to report a situation of fatigue to the supervising physician or Administrative Resident.
 - C. Post-call duties. All intern-level surgical trainees (PGY1) must leave the hospital following their hospital night shift on call. If additional time to transition is required, it must be done as provided in paragraph 1C of this policy. Surgical trainees beyond the PGY1 year may stay to carry out duties following night shift on call if, and only if, they have received adequate sleep while on call at the hospital during the night shift, which is clearly documented by the Administrative Resident as provided for in paragraph 2(A)(1) above. They may only continue to work until 11 a.m. and must not return on duty for at least 16 hours following their departure.
 3. Maximum "High Intensity" (Emergency Department) shift is up to 12 consecutive hours on duty assignment in the Emergency Department, followed by at least an equal period of continuous time off. No more than 60 scheduled hours per week seeing patients in the Emergency Department and no more than 72 total hours per week. They must have 12 hours off after their shift. No transition time is allowed.
 4. All moonlighting hours worked must be included in the total weekly work hours. Upstate University Hospital discourages extra-curricular patient care activities (moonlighting) during the period of graduate medical education, and such activities are permitted only with the express prior written permission of the Clinical Chairperson. With such permission, Residents and Fellows are permitted to moonlight at Upstate University Hospital (to include the Downtown and Community Campuses) in a medical field in which they are Board Eligible or Board Certified and have met the training and other requirements required of other medical staff. The ECFMG precludes those individuals in J1 status from moonlighting regardless of their level of training. PGY1 Residents are not permitted to moonlight. Such activities must be reported and included in the work-hour restrictions contained in this policy. Residents who moonlight must still have one 24-hour period free of duty each 7 days.

It is the responsibility of the post-graduate trainee to notify the Clinical Chairperson of the Number of work hours spent providing patient care services outside of Upstate University Hospital.

If the maximum number of hours permitted under the regulations and this policy have been met, the post-graduate trainee is prohibited from working additional hours.

5. Clinical Chairpersons are required to review Code 405 regulations, department protocols, and hospital policy with their Residents. Both Residents and attending physicians are individually and collectively responsible for assuring compliance with work hour requirements. Further:
 - A. Trainee policies related to trainee schedules must prescribe limits on assigned responsibilities of post-graduate trainees and the duration as daily on-duty assignments progress.
 - B. Post-graduates are to notify their attending any time that they (the trainees) may potentially violate work-hour restrictions.
 - C. Residents are also required to notify their attending when fatigued or not fit for duty using their program's Fitness for Duty Policy reporting requirements. Residents are also to notify their attending when they are fatigued due to unusually active "on-call" periods. Such Residents are to be permitted to leave the facility without recrimination after assuring appropriate transfer of responsibilities.
 - D. The faculty and Residents must participate in periodic compliance monitoring of this policy.
6. Any attending physician or post-graduate trainee who knowingly or unknowingly causes a Resident to violate this stated policy or any related procedures and/or implementation plans may be subject to review and disciplinary action.
7. Residents are required to accurately report their work hours each two weeks using the MedHub institutional software.

Resident Duty Hours Standards

Note: If you have any questions or concerns regarding Duty Hour compliance, call the Graduate Medical Education. All calls will be kept confidential.

Component	Standard
Weekly Hour Limits	80 hours, averaged over a 4 week period
Frequency of Call	No more frequent than every 3 rd night for 24 hour call
Consecutive hour limitation	24 hours with up to 3 hours of transition time Continuous on-site duty, including in-house call, must not be scheduled for/exceed 24 consecutive hours. Residents may remain on duty for up to 3 additional hours (total of 27 hours) of transition time to be used for transfer of patient care, rounds, grand rounds, or didactics. No new patient care may be assigned during the 3-hour transition time.
Nonworking period between assignments	8 hours free of duty between scheduled duty periods. 14 hours after a 24-hour call
Nonworking periods per week	24-hour nonworking period per week. At-home call must not be assigned on these free days (maximum of 12 consecutive working days, with 1 day free on either end).
Moonlighting	All moonlighting hours count towards the limitations
Enforcement/penalties	NY State: Audited by unannounced site surveys. Non-compliance: Statement of Deficiency + monetary fines: \$6,000 per initial violation, \$25,000 for further finding of non-compliance within 180 days and \$50,000 for further finding of non-compliance within 180 days and/or 360 days. ACGME: Evaluated as component of announced RRC site visit and via resident surveys. Penalties include RRC citation, Institutional citation and/or withdrawal of accreditation

