Policy / Procedure:

Duty Hours

KEY TERMS: Residents, Medical Education, Duty Hours

I. PURPOSE:

Carilion Clinic recognizes the importance of creating working conditions within Residency Programs that promote optimal education, safe patient care, and avoid undue Resident stress and fatigue. Residency Programs must schedule Resident assignments to be in compliance with all applicable ACGME requirements. AOA accredited programs must also comply with the appropriate AOA requirements. Faculty members must know, honor, and assist in implementing the applicable duty hour limitations. Residents must comply with those limitations, accurately report duty hours, and cooperate with the duty hour monitoring procedures. All involved must identify and report sources of potential duty hour violations, and collaborate to devise appropriate corrective action.

The provision of safe and timely patient care is not precluded by this policy. In the rare case where a Resident is engaged in patient care that cannot be safely interrupted, the Program must provide additional coverage to relieve the Resident as soon as possible.

II. SCOPE:

This policy applies to all ACGME accredited post-graduate training programs sponsored by Carilion Clinic (CC) or AOA accredited Carilion-based programs sponsored by the Via Virginia College of Osteopathic Medicine, as well as to visiting Residents participating in approved educational programs rotating to CC through institutional agreements. The procedure to request an exemption to this policy is covered in a separate GME policy.

III. DEFINITIONS:

Policy Specific Definitions

- Duty Hours are defined as all clinical and academic activities related to the program. These include patient care, administrative duties relative to patient care (including those, if any, conducted from home), provision of transfer of patient care, on-call time spent in-house, and scheduled activities such as conferences. Duty hours do not include reading and preparation time spent away from the duty site.

- Moonlighting is defined as institution approved, voluntary, compensated, medically related work performed by a Resident outside of the defined program curriculum that may occurring within (internal moonlighting) or outside (external moonlighting) of the training institution. PGY-1 Residents are not allowed to Moonlight (see Moonlighting policy)

•Scheduled duty are periods of assigned duty at this hospital or other training site encompassing hours that may occur within the normal work day, beyond the normal work day, or a combination of both.

IV. PROCEDURE:

- **Weekly limit**: Duty hours are limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities and all moonlighting (both external and internal). All moonlighting hours must be reported as duty hours. Time taken off during a four-week period may not be counted towards the days off for the reporting period and cannot be counted in the averaging.

- **Days off**: Residents must have one day (24 hour period) every week free of all duty (including at-home call), when averaged over the four week rotation, unless Program specific standards do not allow for averaging.

- **Maximum duty period length**:
  - Duty periods of PGY-1 Residents must not exceed 16 hours in length.
  - Duty periods of PGY-2 and above Residents are limited to 24 hours of continuous duty in the hospital. The Resident may remain on-site for transition of care and/or to attend an educational conference when that transition is completed, but may not perform additional clinical duties (including continuity clinic) during those additional 4 hours.
  - After 16 hours of continuous duty, Residents are encouraged to engage in strategic napping, especially when the 16 hour mark occurs between 10:00 PM and 8:00 AM.

- **Individual exceptions to maximum duty hour period**:
  - In unusual circumstances, a Resident may remain beyond their scheduled period of duty (inclusive of the 4 hour period for transition of care) to continue to provide care to a **single patient**.
  - The extension of the duty hour period must be initiated voluntarily by the Resident – never assigned, or suggested, by a faculty member or senior Resident.
  - PGY-1s are not permitted to remain beyond their scheduled duty hour period for any reason.
  - The Resident must transfer the care of all other patients to the Resident team responsible for their continuing care.
  - The Resident **MUST document each occurrence** and submit a Program specific form to the Program Director or a designee at the completion of the shift and prior to leaving the hospital. This may be submitted electronically and must be reported to the DIO.
  - The Program Director will review each submission of additional service.

- **Time off between Scheduled Duty Periods**:
  - PGY-1 Residents should have ten (10) hours, and must have at least eight (8) hours, free of duty between scheduled duty periods.

- Intermediate Level Residents (as defined by Program specific standards) should have ten (10) hours, and must have eight (8) hours, free of duty between scheduled duty periods. They must have at least fourteen (14) hours free of duty after twenty-four (24) hours of in-house duty.

- Residents in their Final Years of education (as defined by Program specific standards) may have flexibility in their duty hour assignments, which might be irregular or extended. Although the standard minimum duty free requirement is 8 hours, some RRCs may allow a period of less than 8 hours under circumstances when the Resident must stay on duty to care for their patients or return to the hospital with fewer than eight (8) hours free of duty. Such instances of fewer than eight (8) hours away from the hospital must be reported to and will be monitored by the Program Director.

- **In-House Night Float** must not be scheduled for more than six (6) consecutive nights.

- **At-Home Call**:

  - At home call must satisfy the requirement for one-day-in-seven free of duty.

  - Time spent in the hospital by a Resident on at-home call must be reported in, and count toward, the 80 hour maximum weekly hour limit.

  - Return to the hospital for episodic care while on at-home call does not initiate a new "off-duty period."

- **Reporting Duty Hours**:

  - Residents are required to maintain an accurate log of duty hours and must input their hours worked into MedHub at least weekly. Failure to do so will be seen as a violation of the Duty Hours policy.

  - Residents who falsify duty hour entry will be subject to disciplinary action and possible dismissal from the Program.

- **Monitoring Duty Hours**:

  - The program Director must monitor Duty Hours on a regular basis.

  - The Program Director must report Duty hour compliance to the faculty on a regular basis.

  - The GMEC will review Duty hour Compliance on a monthly basis.

- **Enforcement**:

  - The Resident should report and discuss all duty hour violations with their Program Director as soon as possible. The goal of the discussion will be to identify possible solutions and changes that can be implemented to facilitate and ensure ongoing compliance.

  - The Program and Institution must support Resident education and implement reasonable changes in the educational program to optimize Resident compliance.

  - Residents with repeated violations of the Duty Hours policy will be subjected to disciplinary action and possible dismissal from the program.

- Residents are required to sign an attestation yearly stating that they have received and agree to abide by the Duty Hours policy.

- **Resident Reporting Program non-compliance**:
  - Residents shall have the option of reporting Program non-compliance with duty hour scheduling for review without reprisal.
  - Residents may report non-compliance directly to the DIO or the Administrative Director of Medical Education.
  - Residents may report non-compliance in an anonymous fashion through the medical education intranet.
  - Residents in AOA accredited programs may also report non-compliance by contacting the Director of Osteopathic Medical Education, the OPTI Director, or the AOA via e-mail (postdoc@osteopathic.org) or through the Postdoctoral Program Violation Hotline at 1-877-325-8197.
  - Residents in ACGME accredited programs may report non-compliance by contacting the ACGME at residentservices@acgme.org or by phone at 312-755-7498, or by mail: Resident Services, ACGME, 215 North State St., Suite 2400, Chicago, IL 60654.

V. OTHER ISSUES / CONCERNS:

Approvals

Name	Title	Dept./Committee	Date
Daniel Harrington, MD	DIO	GMEC	December 18, 2007
Daniel Harrington, MD	DIO	GMEC	January 1, 2011
Daniel Harrington, MD	DIO	GMEC	April 1, 2011
Daniel Harrington, MD	DIO	GMEC	June 21, 2011