

RESIDENT HANDBOOK
Policies and Procedures

I. E. DUTY/ON-CALL HOURS

E. 1. Definition

Duty hours are defined as all clinical and academic activities related to the residency program, i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences. Duty hours do not include reading and preparation time spent away from the duty site.

E. 2. Requirements

1. All Programs, regardless of their accrediting body, are required to meet the ACGME Common Program Requirements related to duty hours as well as any Residency Review Committee requirements as described in the Program Requirements for each specialty.
2. Each Residency Training Program will establish a formal policy governing resident duty hours and working environment that complies with the ACGME Common Program Requirements as well as that specialty's Residency Review Committee Program Requirements and is optimal for both resident education and the care of patients. Basic requirements include:
 - a. Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities. Exceptions (for up to an additional 10%) will require LUMC GME and RRC approval.
 - b. Residents must be provided with 1 day in 7 free from all educational and clinical responsibilities, averaged over a 4-week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, educational, and administrative activities.
 - c. In-house call must occur no more frequently than every third night, averaged over a four-week period.
 - d. Continuous on-site duty, including in-house call, must not exceed 24 consecutive hours. Residents may remain on duty for up to six additional hours to participate in didactic activities, transfer care of patients, conduct outpatient clinics, and maintain continuity of medical and surgical care as defined in Specialty and Subspecialty Program Requirements.
 - e. Adequate time for rest and personal activities must be provided. This should consist of a 10-hour time period provided between all daily duty periods and after in-house call.
 - f. At-home call (pager call) is defined as call taken from outside the assigned institution.
 1. The frequency of at-home call is not subject to the every third night limitation. However, at-home call must not be so frequent as to preclude rest and reasonable personal time for each resident. Residents taking at-home call must be provided with 1 day in 7 completely free from all educational and clinical responsibilities, averaged over a 4-week period.
 2. When residents are called into the hospital from home, the hours residents spend in-house are counted toward the 80-hour limit.

3. The following tenets are understood to be the underpinning of all program-specific duty hours policies:
 - (a) The educational goals of the program and learning objectives of residents must not be compromised by excessive reliance on residents to fulfill institutional service obligations. Duty hours, however, must reflect the fact that responsibilities for continuing patient care are not automatically discharged at specific times. Programs must ensure that residents are provided backup support when patient care responsibilities are especially difficult or prolonged.
 - (b) Resident duty hours and on-call schedules must not be excessive. The structuring of duty hours and on-call schedules must focus on the needs of the patient, continuity of care, and the educational needs of the resident. Duty hours must be consistent with the institutional and program requirements that apply to each program.
 - (c) The institution must provide services and develop systems to minimize the work of residents that is extraneous to their educational program.

E.2. Graduate Medical Education Requirements

Program Directors will provide a written copy of their resident work hour policy to the Central Office of Graduate Medical Education. Program Directors are responsible for monitoring the effects of duty hours responsibilities and making necessary modifications to scheduling to mitigate excessive service demands or fatigue.

1. Monitoring of duty hours is required with frequency sufficient to ensure an appropriate balance between education and service.
2. Duty hours policies will be evaluated at the time of internal review of the training program.
3. Compliance with duty hours regulations will be evaluated at the time of internal review of the training program. Discrepancies will be reported to the GMEC for further action.

E.3. Institutional Support

Loyola University Health System provides institutional support for residents and fellows both through institution-level services and compliance monitoring.

1. Institution-level Services – Way to Go Taxi Service
Loyola University Health System provides residents and fellows access to an on-line taxi voucher system. Way To Go taxis service provides hospital-site-to-home pre-paid taxi services in the event that the resident feels too fatigued to drive home. Vouchers are available through the institution's portal system.
2. Institution-level Monitoring
The Office of Graduate Medical Education conducts confidential, quarterly Duty Hours Surveys to assess ongoing compliance. Data is reviewed by the Institutional Graduate Medical Education Committee and distributed as appropriate.

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