

Policies and Procedures

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PURPOSE: GME Programs, in partnership with Creighton University, must design an effective program structure that is configured to provide residents with educational and clinical experience opportunities, as well as reasonable opportunities for rest and personal activities.

SCOPE: The policy applies to all Creighton University residents, fellows and their respective training programs, and applies whether programs are ACGME accredited or not.

DEFINITIONS:

- **Clinical and Educational Work Hours:** Clinical and educational work hours are inclusive of all in house clinical and educational activities, clinical work done from home, and all moonlighting. It does not include educational activities, research or studying done at home.
- **Work from Home:** Types of work from home that must be counted include using an electronic health record and taking calls from home. Reading done in preparation for the following day's cases, studying, and research done from home do not count toward the 80 hours. Resident decisions to leave the hospital before their clinical work has been completed and to finish that work later from home should be made in consultation with the resident's supervisor. In such circumstances, residents should be mindful of their professional responsibility to complete work in a timely manner and to maintain patient confidentiality.
- **Moonlighting:** Moonlighting is defined as any voluntary activity, not related with training requirements, in which an individual performs duties as a fully-licensed physician and receives direct financial remuneration. The hours spent moonlighting are counted towards the total hours worked for the week. No other duty hour requirements apply; however, Moonlighting must not interfere with the ability of the resident to achieve the goals and objectives of the educational program.
- **Day off:** One continuous 24-hour period completely free from all administrative, clinical and educational activities. Home call cannot occur on a day off.
- **Work hour flexibility:** Exceptions are allowed to provide residents with some control over their schedules by providing the flexibility to voluntarily remain to care for a single severely ill or unstable patient, for humanistic attention to the needs of a patient or family or to attend unique educational events. There is no exception to the 80-hour work week, and the resident must not stay if fatigued. It is important to note that a resident may remain or return only if the decision is made voluntarily.

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Residents must not be scheduled beyond work period restrictions or required to stay by an attending or more senior resident/fellow.

POLICY: Clinical and educational assignments must be assigned while recognizing that faculty and residents collectively have responsibility for the safety and welfare of patients. The ACGME common program requirements recognize that residents may choose to work beyond their scheduled time, or return to the clinical site during a time off period to care for a patient. The requirements preserve the flexibility for residents to make those choices as long as residents recognize the responsibility to work rested and fit for duty.

- Resident Logging
 - Residents are required to document their duty hours in New Innovations.
 - In the case of a duty hour violation, the resident must document on why there was a violation. The program director will then review and document on that violation. A violation may be justifiable, but the program director must approve. Please see the section on flexibility to see examples of what is justifiable.
- Time off between scheduled clinical work and education periods:
 - Residents should have eight hours off between *scheduled* clinical work and education periods.
 - Residents must have at least 14 hours free of clinical work and education after 24 hours of in-house call.
- Days off
 - Residents must be scheduled for a minimum of one 24-hour day in seven free of clinical work and required education. This can be averaged over four weeks to allow flexibility in scheduling time off. Home call cannot be assigned on a free day.
- In House Call
 - Residents must not be scheduled for in-house call no more frequently than every third night when averaged over a four-week period.

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- o Work periods for residents must not exceed 24 hours of continuous scheduled clinical assignments. A resident may have an additional 4 hours for care of established patients. These additional 4 hours cannot include ambulatory work or new patients to care for.
- Home Call
 - o Does not require a rest period after an assignment of home call overnight.
 - o At home call is not subject to the every third night limitation but must not be so frequent or taxing to preclude rest or reasonable personal time for each resident
- Night Float
 - o Night float must occur within the context of the 80-hour and one-day-off-in-seven requirements.
 - o The number of consecutive weeks of night float and maximum number of months of night float per year may be further specified by a specialties Review Committee.
- Flexibility at resident's discretion
 - o There may be circumstances when residents choose to stay to care for their patients beyond a work period or return to the hospital with fewer than eight hours free of clinical experience and education. This must occur within the context of the 80-hour work week and the one day off in seven requirements.
- AMENDMENTS OR TERMINATION OF THIS POLICY Creighton University reserves the right to modify, amend or terminate this policy at any time. This policy supersedes all program level policies regarding this area/topic. In the event of any discrepancies between program policies and this GME policy, this GME policy shall govern.