

Updated 10/2017

General Surgery Rules on Absences.

VACATION RULES AND PRINCIPLES

1. Vacations will not be routinely covered
2. If there is a single resident on a service that is usually staffed with more, vacation cannot be taken at that time without express approval by the attendings on that service.
3. No more than 1 resident on a service at a time on vacation
4. Vacations ARE allowed in July as long as there isn't a new intern on the service.
5. No more than 3 residents at a time on vacation from the program without explicit approval of the office. There are certain weeks where only two residents will be allowed at the discretion of the office.
6. Vacation conflicts will be resolved by seniority.
7. Any vacation request submitted that doesn't conform to the above will be declined and subsequent requests will go to the end of the line, sacrificing seniority.
8. Vacations are allowed in SCU if it leaves two other residents at the time
9. It is preferred that vacations are submitted thru New Innovations

PTO and CHANGE RULES AND PRINCIPLES

1. Serious family/personal/professional issues will ALWAYS be accommodated and these are a legitimate reason for leaving a service uncovered or pulling a resident from a core service to cover.
2. Academic presentations will ALWAYS be accommodated and these are a legitimate reason for leaving a service uncovered or pulling a resident from a core service.
3. Attendance at academic meetings where a presentation is NOT being done is subject to the same rules as vacations. Residents can use MMC conference time for these, but are responsible for their own expenses and they should be aware that ABS rules on attendance are more rigid than MMC rules in the PGY 4 and 5 years.

PROCESS

1. When there is a need that arises after the schedule is made, the procedure is as follows:
 - a. The resident looks for a coverage solution/trade, asks the other affected resident(s) and brings that to the administrative chief resident for approval.
 - b. The administrative chief will consider it and either approve or suggest something else.
 - c. Once approved by admin chief, it is submitted to residency office in new innovations for final approval.
 - d. All switches need to be duty hour compliant re: 80 hr, 1 day off in 7, and no more than 24 hours on with a 6 hour continuity time at the end of the 24.
 - e. We will be developing and trialing a detailed mechanism for the above using New Innovations.
 - f. A resident needs to try to make their own arrangements first, if unsuccessful, THEN the office will get involved.

GUIDELINES for COVERAGE for ALLOWED ABSCENCES

1. There is NO guarantee for coverage when a legitimate resident absence leaves a service uncovered. That being said, attempts will be made to staff cases with residents of appropriate level.
2. It is the responsibility of the resident to alert the attendings and apps of the service to any upcoming absence, especially if it is not on the block schedule for amion at least one month ahead of time
3. When a resident is to be pulled, the first services to look towards are: research, plastics, electives, thoracic. A resident won't be pulled from other services until those other options are exhausted.
4. If those services are not staffed, any other arrangement for coverage needs to be cleared by the chief resident, the office and a supervising attending on the service from where the resident will be pulled.
5. If any attending is unhappy with the situation, please politely point them towards this document and the residency office.