

**University of Pittsburgh
Medical Center
Medical Education Program**

Department of Pathology

Pathology Residency Training Program

Approved by:

Date:

Title: Resident Duty Hour and Moonlighting Policy

Purpose: The Pathology Residency Training Program establishes this policy regarding resident duty hour requirements to ensure program compliance with ACGME and UPMCMEP resident duty hour regulations.

Scope: All UPMCMEP and external residents assigned, or rotating through, the Pathology Residency Training Program. This policy is fully intended to operate in full accord with UPMCMEP policies and procedures and the ACGME Common Program Requirements.

I. Supervision of Residents

- A. Qualified faculty must supervise all patient care as specified in the "Supervision Policy". The Program Director must ensure, direct, and document supervision and faculty support appropriate for the level of training of residents at all times. Residents must be provided with efficient, reliable systems for communicating with supervising faculty.
- B. Faculty schedules must be structured to provide residents with continuous supervision and consultation.
- C. Faculty and residents must be educated to recognize the signs of fatigue and adopt and apply practices to prevent and counteract the potential negative effects.

II. Duty Hours

- A. 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 clinical site.
- B. Duty hours are averaged over a four-week period, inclusive of all in-house call activities and must be limited to 80 hours per week on average.
- C. Averaged over a four-week period, inclusive of call, residents must be provided with 1 day in 7 free from all educational and clinical responsibilities. One day is defined as one continuous 24-hour period free from all clinical, educational, and administrative activities.
- D. A required 10-hour time period for rest and personal activities must be provided between all daily duty periods, and after in-house call as per ACGME guidelines for resident duty hours.
- E. It is the responsibility of the Program Director, faculty, and the individual resident to ensure full compliance with both the letter and spirit of these respective duty hour requirements.

III. On-Call Activities

The objective of on-call activities is to provide residents with continuity of patient care experiences throughout a 24-hour period. In-house call is defined as those duty hours beyond the normal workday when residents are required to be immediately available in the assigned institution.

- A. Averaged over a four-week period, in-house call must occur no more frequently than every third night.
- B. Continuous on-site duty, including in-house call, must not exceed 24 consecutive hours. Residents may remain on duty for up to 6 additional hours to participate in didactic activities, maintain continuity of medical and surgical care, transfer care of patients, or conduct outpatient continuity clinics.
- C. A new patient is defined as any patient for whom the resident has not previously provided care. No new patients may be accepted after 24 hours of continuous duty, except in outpatient continuity clinics.
- D. At-home 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 beginning from the time the resident arrives at the hospital.
 - 3. The Program Director, faculty, and residents must monitor the demands of at-home call in their programs and make scheduling adjustments as necessary to mitigate excessive service demands and/or fatigue.

IV. Moonlighting (It is at the discretion of the Program Director to permit moonlighting).

- A. Moonlighting is defined as any outside activity for which compensation is received, especially when not related to the training program. Because residency education is a full-time endeavor, the Program Director must approve and monitor all moonlighting to ensure that moonlighting does not interfere with the ability of the resident to achieve the goals and objectives of the educational program.
- B. Residents are not required to moonlight.
- C. A prospective written statement of permission from the Program Director is required and is made part of the resident's file. If at any time the Program Director determines that a resident's moonlighting schedule is adversely impacting the resident's performance in the training program, the Program Director may withdraw the permission to moonlight.
- D. All moonlighting activities must comply with The University of Pittsburgh Medical Center Medical Education Program's written policies and procedures regarding moonlighting and the ACGME Institutional Requirements.
- E. The Program Director may not approve residents for moonlighting activities either internal or external that require residents to exceed the 80-hour (on average per 4-week) rule or other provisions of the duty hour requirements.
- F. External "moonlighting", i.e. outside of UPMC and affiliated facilities, is not considered part of the training program. UPMC MEP professional liability insurance does not cover such private actions by the physician even where experience is approved in writing by the Program Director.
- G. See the UPMC MEP Resident Moonlighting policy for additional information.

V. Monitoring and Auditing

- A. All residents and faculty will receive a copy of this policy and the UPMCMEP policy on duty hours. A copy will be in the resident handbook and distributed to all residents at the beginning of the academic year.
- B. Duty hours are monitored on an ongoing basis to ensure an appropriate balance between education and service. Compliance with this policy and the UPMCMEP Duty Hours Policy must be monitored by everyone involved in the residency program including faculty, residents, and administrative staff.
- C. The Program Director, faculty, and administrative Chief Resident are charged with monitoring the demands of all call activities and making the necessary adjustments in scheduling to deal with excessive service demands and/or fatigue. Residents are encouraged to proactively notify the Program Director when their schedule indicates a violation of the duty hour standards.
- D. All residents are required to report their duty hours for entry into the program database. These hours are obtained for every resident on every rotation as part of their mandatory rotation evaluation form (see attached Rotation Evaluation Form).
- E. On a weekly basis, the Program Coordinator, and administrative Chief Resident will independently monitor compliance with the regulations and notify the Program Director when they identify violations or have concerns. When a violation is identified, the resident, faculty member, and Program Director will meet to identify the cause of the violation and develop a solution to avoid future violations. The resident and faculty member will be advised on the duty hour standards and put on notice that continued violations may result in disciplinary action.
- F. Duty hour history is specifically reviewed with all residents at their six-month evaluation with the Program Director.

VI. Institutional Oversight

- A. The Pathology Residency Training Program must be prepared to present documentation of compliance with this policy on a quarterly basis. A representative from the GME Office or the Resident Duty Hours Sub-committee will randomly select programs for review and visit programs for compliance. If the program is found non-compliant, the Resident Duty Hour Sub-committee will notify the Program Director and Department Chair with recommended corrective actions. Failure to take corrective action will result in the program being placed on institutional warning status and given 30 days to correct any deficiencies. Continued non-compliance will be reported to the UPMCMEP Board for action.
- B. Residents may address concerns without fear of reprisal and are encouraged to contact the GME Office in strictest confidence.

VII. Exceptions to the Duty Hour Standards

- A. UPMCMEP policies and procedures to request an exception to the resident duty hour requirements must be followed. An RRC may grant exceptions for up to 10% of the 80-hour limit, to individual programs based on a sound educational rationale. Requests for approval for such exceptions must be forwarded in a timely fashion to the GME Office and Designated Institutional Official (DIO) prior to communication with the RRC.
- B. The Resident Duty Hours Sub-committee shall review all applications for the exception and forward their recommendation to the GMEC. All exceptions requests must be based on sound educational rationale.

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Date

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Date