

Absences—Illness and Personal Emergencies

Purpose

To outline the policy regarding illness and personal emergencies.

Illness / Leave while on other services:

The EM resident must notify the chief resident or liaison on the affected service before their scheduled duties begin. (Refer to the Rotation Contact Information on the residency website for contact information.)

At Saint Paul and Minneapolis Children’s Hospitals, the EM resident must also call the attending physician working in the ED at Children’s to notify them that there will be no coverage that evening.

Both the Residency Manager (Lori Barrett) and administrative chief resident (as listed on ShiftAdmin) must be notified via voicemail message or email.

Illness / Leave while working in the ED:

1. The EM resident will contact the chief resident on administrative call to help arrange for the shift to be filled. The admin chief resident schedule can be found on ShiftAdmin.
2. Within 24 hours of the absence, the EM resident will send an e-mail notification to the chief resident, Assistant Program Director (Rachel.A.Dahms@HealthPartners.com), and Residency Manager (Lori.J.Barrett@HealthPartners.com).
3. The involved chief resident will update the monthly schedule on ShiftAdmin.

At the request of the Program Director, a resident that has been frequently ill may be required to provide documentation from his/her physician upon returning to duties. Clearance by Regions' Employee Health Services or occupational health may also be requested prior to returning to duties.

Residents will not leave the hospital simply because their service or shift is quiet. This includes nonclinical shifts are partially clinical shifts such as “resident of the day” or “conference call”. They are to use that time for reading, chart completion, log/case entry, etc. Residents should be physically present in-house in case of an emergency unless special approval is obtained from the Program Director

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