

# **Resident Duties and Supervision**

## **Purpose**

It is the policy of the Emergency Medicine Residency Training Program that there should be adequate staffing in all clinical situations to prevent excessive patient loads, excessive new patient work-ups, inappropriate intensity of service or case mix, and excessive length and frequency of clinical work contributing to excessive fatigue.

## **Responsibilities**

### **ED Schedule and Backup/Pull**

Residents are scheduled for all required residency-related activities. The schedule for the Emergency Department is developed by the chief residents and overseen by the Assistant Residency Director. Once the schedule is completed, it is disseminated to all residents for review. The final schedule is approved by the Assistant Residency Director.

Residents are to be available for their assigned activities as listed on the ED schedule, and by phone/text for backup or pull in the ED. Back up and pull are listed on ShiftAdmin.

Residents will be scheduled for ~40-45 clinical hours per week, in addition to scheduled nonclinical duties such as Resident of the Day shifts, Conference Call, and conference attendance. In the ED, residents will have one 24-hour period off in every 7 days. The designated 24-hour off period will not include conference time.

Schedule and call for off-service rotations are described in the letter of understanding between Emergency Medicine and each department. The specific schedule is determined by the off-service department. Very rarely, resident backup or pull may be used to cover off service rotations with significant emergency medicine resident presence. These rare instances will be addressed on a case-by-case basis.

### **Patient Care Responsibilities**

Residents are to be present and on time for their assigned clinical and nonclinical duties. Resident patient care activities will always be supervised by faculty (EM or off-service). The resident will be given patient care responsibilities commensurate with level of training and demonstrated skills and experience. Faculty will be available at all times for consultation and guidance. Adequate resources and supervision will be available at all times in case of sudden and unexpected patient or resident needs which could jeopardize patient care.

### **Oversight**

It is the responsibility of the Program Director to review all rotations and resident schedules to assure that duty hours and responsibilities are appropriately assigned. The Program Director shall immediately take any corrective action is needed to assure compliance with these policies and procedures.

### **Rotation Coordinators**

It is the responsibility of the Rotation Liaison and Coordinator to assure that an appropriate training experience is offered to the resident consistent with the learning objectives and the resident duties of the rotation as set forth in the rotation description. This includes assistance with scheduling of activities, provision of adequate resources, and appropriate teaching and oversight.

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