



Title: Minimum Resident Coverage	Policy
This policy applies to: All services that include at least on resident learner	

PURPOSE:

Rationale for policy: The American College of Graduate Medical Education (ACGME) requires all OB/Gyn training programs to adhere to certain guidelines which help balance the dual role of resident physicians—providing service to our patients and learning our profession. These policies include but are not limited to:

1. Maximum hours of work per week (i.e.: duty hours) must be limited to 80 hours per week, averaged over a four-week period.
2. The resident program director must adjust schedules as necessary to mitigate excessive service demands and/or fatigue.

Over the last several years our Department has created major changes in the system we use to deliver care to patients. These include the initiation of “apprentice clinics” for our first and second year resident patient continuity clinics (PCC), opening of the Eubank Women’s Health Clinic and dividing clinical service locations, expansion of sub-specialty faculty and clinical services, and expansion of generalist faculty and clinical services. All of these changes create challenges to providing resident physician coverage for all clinical operations.

Resident factors also contribute to the challenge of providing resident physician coverage for all clinical operations. Nationally a trend toward sub-specialization continues and we have seen this effect at UNM. As more residents apply and interview for fellowship positions, clinical absences increase. More residents are choosing to have children during residency training, and maternity leave is another source of increased clinical absences. These absences, coupled with routine vacations, sick leave and emergency family leave, must be considered when covering clinical services.

GOAL OF POLICY:

The goal of the policy is to detail the minimum number of residents that are required to provide safe patient care on each clinical rotation. If residents are absent from clinical duties for any reason (sick leave, maternity leave, fellowship interviews, etc.) but the minimum complement of residents on a clinical service is still met, the missing resident will not be covered. This will help prevent residents from covering others' (non-essential) clinical duties, ensure they obtain the educational content of their assigned rotation, and reduce total hours worked when both planned and urgent absences occur. This policy will also help prioritize operative experience over outpatient clinic attendance. It will also help us prioritize resident wellness and mitigate significant fatigue and burn out.



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DAY

MFM

- 4th year (MFM chief and covers L&D) – rounds/inpatient service *Can be covered by R3
- 3rd year (rounds – then goes to ultrasound - clinic Eubank/WHC) – consider making this the Jeopardy resident
- 2nd year (rounds – clinic Eubank/WHC) *Can be covered by R1 when on service
- 1st year every other month (rounds/clinic)
- +3 fellows, inpatient NP, outpatient NP

Gyn

- 3rd year
- 1st year

L&D

- 3rd year (L&D)
- 2nd year (GYN inpatient)
- 1st year (L&D) – postpartum rounds

Onc

- 4th year
- 2nd year *Can be covered by R1 when on service
- 1st year (every other month)
- +inpatient PA, outpatient NP x2

Urogyn

- 4th year
- 2nd year
- Clinic often no fellows or residents; prioritize OR for fellows and residents
- +3 fellows, outpatient NP

Family Planning

- 4th year (REI Chief)
- 1st year

Lovelace rotation

- 4th year —must have minimum of one resident on service at all times, could be 3 or 4.
- 3rd year



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Presbyterian
-3rd year

REI/Family Planning
-4th year

SRMC
-2nd year

Elective
-3rd year

TSI
-1st year

Breast/US
-1st year

Nights/Weekends

- Chief, not present on Sunday days—covers ONC service, OR/L&D supervision & teaching
- 3rd year, not present on FLOAT in second half of year—runs the board
- 2nd year—ED consults, Covers MFM, Gyn, Urogyn, FP services. Helps run OBT and L&D. Runs L&D second half of the year.
- Intern, not present first two weeks of the FLOAT month in the first half of the year—runs OBT, SVDs, covers ROB service

Minimum complement: 3 residents

Should not be without Night Float Chief first half of the year (no vacations or must have in house coverage)

Legend

Positions in red: must be covered by resident at same level or higher level of training

Positions in purple: do not need to be covered in case of absence



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