



Policy No.	Click here to enter text.
Origination Date:	March 22, 2021
Last Revision Date:	April 8, 2022
Last Review Date:	Click here to enter a date.

Category: Admin/HR

Policy Owner: Graduate Medical Education

Retired Date:

Policy Title: Internal Medicine Time Off Procedures

Supersedes: [Click here to enter text.](#)

POLICY

Paid Time Off (PTO), time off and scheduling guidelines for residents in Graduate Medical Education (GME) Internal Medicine (IM) Residency at Fairfield Medical Center (FMC).

PURPOSE

To establish guidelines for requesting PTO, time off & leave within an academic year while ensuring adequate staffing based on the hospitals needs. Within the guidelines of our respective accrediting body, the Accreditation Council of Graduate Medical Education (ACGME), and fulfillment of a residents requirements for their specialty board certification.

RESPONSIBILITIES

I. Residents:

- A. Residents are expected to perform their duties as physicians for a minimum period of eleven months each academic year. The ACGME continuity of care requirements dictates that there cannot be an absence from the residency program for vacation, illness, personal business, leave, etc. exceeding a combined total of one month per academic year. The American Board of Internal Medicine (ABIM) defines one month as 21 working days or 30 calendar days.
- B. The amount of time a resident can be away from residency duties and still meet board requirements vary among the specialties. **It is the residents responsibility to be aware of his/her specialty requirement.**
- C. Each resident is responsible for notifying GME leadership of their PTO requests and submitting requests within the proper time frame.
- D. Each resident must fulfill their required number of shifts determined at the start of employment, based on their rotation schedule. If a resident misses more than three consecutive shifts without notifying GME leadership the resident is subject to disciplinary action up to and including termination.
- E. All leaves will be scheduled with prior approval of the Program Director (PD), with the exception of emergencies or unexpected illnesses. In the case of unexpected emergency or illness, the resident should contact the PD, the preceptor and program coordinator at the earliest possible time, no less than two hours prior to the shift start time.
- F. If leave time is taken beyond what is allowable for specialty board and the resident is required to extend his/her period of activity in the training program, the resident should request permission to extend and must establish a schedule for doing so in consultation with the PD.

II. Program:

- A. The PD is responsible for approving/denying PTO requests prior to the start of the academic year.

- B. Weekends and call schedules will be assigned based on annual department rotations announced at the start of each academic year (adjusted when needed with additional/new staff), assigned in collaboration with co-chiefs and GME leadership.
- C. In cases where a resident is granted a leave of absence by the program, or must be away because of illness or injury, the PD is expected to inform the Board promptly by electronic mail of the resident's departure date and expected return date. All time away from training in excess of the allocated time for vacation and illness will be recorded in New Innovations.
- D. Requests for PTO, time off and leave are approved by the PD and confirmed by the program coordinator. Confirmation of approved/denied time will be communicated by the program coordinator to the resident and the Preceptor. Requests with less than 45 days notice require the Preceptor's signature of approval.

DEFINITIONS

- I. **Priority PTO:** scheduled, planned, pre-approved PTO requested in advance by each resident, equaling 5 days of weekly consecutive PTO. These vacation periods may not accumulate from one academic year to another. Annual vacations must be taken the year of service for which the vacation is granted. No vacation periods may be concurrent and the resident does not have the option of reducing the total time required for residency by relinquishing vacation time. All attempts will be made to not have more than one resident on PTO for the same service simultaneously.
- II. **Emergency PTO:** unplanned PTO, based on immediate resident need. Five days per academic year are available for time off due to illness. Time off due to illness must be reported to the PD, Supervising Physician, Residency Clinic, Chief Resident(s) and GME Department. If direct notification is impossible, the ill resident should immediately notify the program coordinator who will then undertake the necessary notification. PTO time does not carry over to the next academic year. The residents should have the option to use this time for interviews for employment, illness, emergency, etc.
- III. **Time Off:** GME wants to make every effort to support well-being of our residents. As long as at least 48-hour notice is given a resident may attend a medical appointment during regular work hours, with preceptor approval, and a note verifying the resident attended a medical appointment.
- IV. **Long Term Absence:** Absence from residency education exceeding one month within the academic year. Absence from the residency, exclusive of the one-month vacation/sick time may interrupt continuity of patient care for a maximum of three consecutive months in each PGY 2 and PGY 3 training. Leave time may be dispersed throughout the year or taken as a three-month time block.
- V. **Types of Leave:**
 - A. Medical leave: which is not FMLA eligible may be provided at the discretion of the PD in 30-day increments, at a maximum of 52-weeks. Medical documentation is required if the resident is away from work longer than the 5 consecutive calendar days. If PTO is available, it must be exhausted before going into unpaid status.
 - B. Education leave: may be granted at the PD's discretion.
 - C. Military leave/Jury duty: Residents will be granted military leave or leave for jury duty as required by applicable law. Please contact Human Resources (HR) for specifics.
 - D. Personal leave: may be provided at the discretion of the PD in 30-day increments only after other forms of leave have been exhausted.
 - E. Bereavement: days are considered EMERGENCY PTO days.

- VI. **Leaves of absence in excess of three months:** are considered a violation of the continuity of care requirement. The Board may require the resident to complete additional continuity of care time requirements beyond what is normally required to be eligible for certification.

Please Note: Time away from the residency program for educational purposes, such as workshops or continuing medical education activities, are not counted in the general limitation on absences; but should not exceed 5 days annually, and is at the PD's discretion.

- VII. **Family Medical Leave Act (FMLA):** The residency program follows FMC guidelines for FMLA leave. As required by the FMLA, FMC allows eligible residents to take up to 12 weeks paid or unpaid leave in a rolling 12-month period for certain family members or medical reasons. Additional information of FMLA is available through the HR Department.
- VIII. **Maternity Leave/Adoption:** Maternity leave is available to eligible residents for the birth or adoption of a child under FMLA and FMC policy guidelines. If certain requirements are met, resident may be eligible for maternity (or other) leave related to adoption, childbirth, pregnancy and/or nursing an infant for up to 4 months.

PROCEDURE

- I. **Resident Priority PTO Requests:**
- A. All priority PTO requests must be submitted at least one month prior to the start of the academic year. The priority PTO requests are to include three weeks of requests (five consecutive week days).
 - B. All other priority PTO requests are to be submitted at least 45 days in advance.
 - C. Submissions need to be utilizing the GME resident PTO request form.
 - D. Residents will be notified via the Program Coordinator when PTO is approved/denied.
 - E. PTO switch requests may be submitted and approved only due to unforeseen circumstances.
- II. **Resident Emergency PTO Requests:**
- A. If more than 5 days are needed for Emergency PTO, the resident will need to cancel necessary amount of Priority PTO.
 - B. The PD and Program Coordinator must be notified via phone as soon as possible; and no later than 2 hours prior to their scheduled shift.
 - C. Resident must also notify their direct Preceptor within the same time frame.
 - D. If more than one scheduled shift is needed, the resident needs to call off for each scheduled shift. (If unsure of time frame due to illness, resident must touch base each day).
 - E. A signed resident request for PTO form will still need submitted by the resident upon their return to work.
 - F. GME will follow FMC policy with COVID-19 testing and PTO.
- III. **PTO Guidelines:**
- A. Resident PTO is not allowed during the following rotations: Emergency Medicine, Hospitalist, and ICU.
 - B. All requests for PTO will be approved or denied at the discretion of the PD
 - C. The amount of PTO days off per academic year may not exceed 20 days.
 - D. If a PTO request coincides with a previously scheduled on call shift, it is the resident's responsibility to find their own call coverage.
 - E. Residents are not allowed to take half days of PTO.
- IV. **Days off when the resident is not needed on rotation:**
- A. When the IM residency clinic or rotation clinic is closed, residents are required to notify GME leadership and revert back to service.

- B. When the rotation office is closed please notify GME leadership for guidance prior to occurring event or as soon as notified by the Preceptor. Options for these days include:
1. Extra clinic day, if required numbers for graduation have not been met
 2. Project day, aligned with current rotation, assigned by the PD.

V. Requests for Leave

- A. It is the resident's responsibility to discuss any leave time with the PD to ensure training requirements are not adversely affected, which may extend their residency training period.
- B. Time under any of the following may not be counted toward Board eligibility:
1. Holiday's where residents do not complete required alternative assignment
 2. Vacation/Priority PTO
 3. Sick time
 4. Leave

References:	Click here to enter text.
Distribution:	Internal Medicine Residents/GME Staff
Related Policies/Forms/Records:	Employee Effectiveness Policy Duty Hour & Moonlighting Policy GME Manual Family Medical Leave Act (FMLA) Paid Time Off (PTO) Attendance & Tardiness Unpaid Leave of Absence (LOA) Pandemic Leave & Pay Practices Bereavement Leave Military Leave Jury Duty
Related Standards/Legislation:	Click here to enter text.

REVISION HISTORY

Date	Description of Revision	Authored By
3/22/2021	Policy created	GME
4/8/2022	Complete revision	GME

APPROVAL AND REVIEW

Approval	Click here to enter text.	Date:	Click here to enter a date.
Approval (if applicable)	Click here to enter text.	Date:	Click here to enter a date.
Approval (if applicable)	Click here to enter text.	Date:	Click here to enter a date.
Committee Review Recommend:	Policy & Procedure Oversight Committee	Date:	Click here to enter a date.
Committee Review Recommend: (if applicable)	GMEC	Date:	April 8, 2022
Committee Review Recommend: (if applicable)	Click here to enter text.	Date:	Click here to enter a date.

Policy Title:	Policy No.:
---------------	-------------

Review Schedule:	Every 3 years
------------------	---------------