Program Policies and Procedures for Residents Moonlighting, Duty Hours and Work Environment
Creighton University Department of Surgery
Residency Training Program

Moonlighting
Creighton University Surgery Residents are not allowed to moonlight.

Duty Hours
Duty hours are defined as all clinical and academic activities related to the program; i.e., patient care (both inpatient and outpatient), administrative duties relative to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled activities, such as conferences. Duty hours do not include reading and preparation time spent away from the duty site.

1. Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities.

2. Residents must be provided with one day in seven free from all educational and clinical responsibilities, averaged over a four-week period, inclusive of call.

3. Adequate time for rest and personal activities must be provided. This should consist of at least 8 hours, and suggested a 10-hour time period provided between all daily duty periods and after in-house call. If the resident has a short rest period, they are to make arrangements with chief resident to come in late or leave early the next day.

4. Any resident who feels that they are fatigued or are not able to stay within duty hour regulation, or for any reason cannot carry out their duties should contact the chief resident of their service and barring a chief resident the administrative chief resident whose responsibility it is to provide coverage for the resident. All such incidents will be reported to the program coordinator and program director.

5. No changes can be made unilaterally for call without the permission of the administrative chief resident whose responsibility it is to determine that such a change does not result in duty hour violation for that resident or any other resident. Issues of disagreement on this are to be brought to the program director.

On-call Activities
1. In-house call must occur no more frequently than every third night, averaged over a four-week period.

2. Continuous on-site duty, including in-house call, should not exceed 24 consecutive hours. Residents may remain on duty for up to four additional hours to participate in didactic activities, transfer care of patients, conduct outpatient clinics, and maintain continuity of medical and surgical care.

3. For PGY1 residents the duty hour regulations should be compliant with ACGME regulations. Specifically a PGY1 resident duty hours should not exceed 16 hours.
4. No new patients may be accepted after 24 hours of continuous duty.

5. At-home call
   - The frequency of at-home call is not subject to the every-third-night, or 24+4 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 one day in seven completely free from all educational and clinical responsibilities, averaged over a four-week period.

   - When residents are called into the hospital from home, the hours residents spend in-house are counted toward the 80-hour limit.

Logging Duty Hour Rules and Repercussions
1. Residents will honestly log hours on a daily basis to stay within the ACGME 80-hour regulations.
2. Duty Hours are to be logged no later than Sunday for the previous week.
   a. The program director and coordinator will closely review schedules and assignments to assure they allow residents to stay compliant with duty hour regulations.
   b. The residency coordinator will run a duty hour report every Monday morning. During this time, the coordinator will review hours logged to discover any cases where hours might have been logged incorrectly. Residents without updated logs at this time will be placed under review.
   c. The program director and chief residents will review weekly hours in their Thursday morning meeting and address any non-compliance. A plan will be formed and implemented with all noncompliant residents.
   d. Residents will randomly be checked on to be sure they are leaving the hospital when they are supposed to, and that they are logging their hours honestly.
   e. If a resident is found to be dishonest when logging duty hours, that resident will be immediately placed on probation.
   f. If, at this point, a resident is unable to stay within these duty hour rules, averaged over a rolling 4 week period, that resident will be placed under review. During this time they will meet with the Program Director to create a plan to become and stay compliant.
   g. All Duty Hour violations must have the justification listed.