

3.C.8

Resident Duty Hours

Each program must have a written policy on resident duty hours. In developing the duty hour policy, consideration should be given to the educational needs of the resident, the needs of the patient, including patient safety, and continuity of care. This policy must be in compliance with institutional policies as well as with requirements of all relevant accrediting bodies (e.g., ACGME and RRC). The institutional requirements are as follows.

1. Duty hours are defined as all clinical and academic activities and includes patient care (inpatient and outpatient), all administrative duties related to patient care, in-house call, scheduled academic activities (e.g., conferences, morning report, lectures, etc.), and research that is a required part of the residency program.
2. Duty hours, as defined above, are limited to 80 hours per week, averaged over a four-week period. Note: Schedules may be developed that require a resident to work up to 10% over the 80 hours in a week, yet must meet the 80-hour limit when averaged over four weeks.
3. Residents must be provided with one day in seven free from all clinical and academic activities, averaged over a four-week period. One day in seven is defined as a continuous 24-hour period.
4. Residents should be given a ten-hour, and must be given an eight-hour rest period between all daily duty periods and after in-house call. Note: Rest is defined as a period free of any of the activities listed in #1).
5. In-house call must occur no more frequently than every third night, averaged over a four-week period. Note: Program Directors must be notified if residents trade call schedules. Such trading should not violate the every third night restriction.
6. Continuous on-site duty, including in-house call, must not exceed 24 consecutive hours. Residents may remain on duty for up to six additional hours to participate in required educational activities, transfer care of patients, conduct outpatient clinics and maintain continuity of patient care.
7. Residents may not be assigned or accept new patients after 24 continuous hours on duty unless permitted specifically by their accrediting body. Note: A new patient is defined as a patient for whom the resident has not previously provided care.
8. At-home call is not counted toward the duty hour limit. However, if the resident must come into the hospital, the in-house time must be applied to the duty hour limit. Also, at-home call does not have to be limited to no more than every third night. However, residents taking at-home call must have one day in seven free from all clinical and academic responsibilities, averaged over a four-week period.
9. Moonlighting activities must comply with the institution's policy on moonlighting. Moonlighting as part of a program (extra credit rotation), or moonlighting at any institution affiliated with the University of Connecticut, must be counted toward the duty hour limit.

All residency and fellowship programs sponsored by the University of Connecticut School of Medicine must comply with the institutional duty hour restrictions as well as any restrictions specified by their respective RRC and/or the ACGME. No program sponsored by the University of Connecticut School of Medicine may request an exemption from these restrictions.

The GMEC is responsible for monitoring compliance with the duty hour requirements. It shall carry out this charge through review and monitoring of the quarterly duty hour reports, periodic written surveys of residents, and random unannounced interviews of residents. **A hotline has been set up that residents may access to report violations of duty hour requirements (860-679-4353).**