

**Policy on Duty Hours**  
**Graduate Medical Education Committee**  
**Children's National Medical Center**

I. **Scope:** This policy applies to all residents in training programs at Children's National Medical Center (CNMC). This policy is designed to establish standards for all health care practitioners engaged in the supervision and teaching of residents who are enrolled in post-graduate training programs at CNMC. It is also the intent of this policy to outline the methods that will be used by the Graduate Medical Education Committee, GMEC to monitor and confirm all programs' compliance with ACGME duty hours limitations.

II. **Definitions:**

The term "resident" refers to all graduate medical trainees, including interns, residents, and fellows

Housestaff – refers to all interns, residents and fellows

Duty hours are defined as all clinical and academic activities related to residency program, ie, patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences. Duty hours do not include reading and preparation times spent away from the duty site.  
(ACGME Common Program Requirements, effective 7/1/03)

In-house call is defined as those duty hours beyond the normal workday when residents are required to be immediately available in the assigned institution.

At-home call (pager call) is defined as calls taken from outside the assigned institution. Program Directors must develop a plan to monitor the frequency of at-home calls to ensure the opportunity for adequate rest. This time should not be counted toward the 80-hour limit.

III. **Policy:**

- Each ACGME-accredited program must develop a program specific policy that is consistent with the standards in this policy.
- A copy of all ACGME-accredited program Duty Hours policy will be kept on file in the GME office.
- Program must conduct frequent surveys to collect raw data that may be used to verify program's compliance with the ACGME duty hour requirements. The data collected must be shared with the GMEC upon request.
- The GME office will conduct semi-annual anonymous surveys of house staff in each accredited program (enforced by program directors) to confirm the house staff's perception of the program's compliance.

Programs reported out of compliance will be notified and an internal review of that program may be scheduled immediately.

- Specific program policy must be approved by the GMEC and distributed to all residents and faculty.
- The Program Director is responsible for the duty schedules of his/her program.
- The Program Director is responsible for making the ultimate decisions regarding scheduling of all duty hours for all residents within their scope of supervision.
- The Program Director is also responsible for:
  - ensuring that the learning objectives of his/her program are not compromised by excessive reliance on residents to fulfill service obligations
  - directing and documenting adequate supervision of residents at all times
  - monitoring (with the faculty) the demands of at-home call and make scheduling adjustments as necessary to mitigate excessive service demands and/or fatigue
  - ensuring that moonlighting does not interfere with the ability of the residents to achieve the goals and objectives of the educational program.
  - complying with the sponsoring institution's written policies and procedures regarding moonlighting

The on-call schedule is developed with the administrative assistance of a designee of the Program Director.

#### IV. **Requirements:**

- Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities.
- Residents must be provided with 1 day (one day is defined as one continuous 24-hour period free from all clinical, educational, and administrative activities) in 7 free from all educational and clinical responsibilities, averaged over a 4-week period, inclusive of call.
- Adequate time for rest and personal activities must be provided. This should consist of a 10-hour time period provided between all daily duty periods and after in-house call.
- In-house call must occur no more frequently than every third night averaged over a four-week period.
- Continuous on-site duty, including in-house call, must not exceed 24 consecutive hours. Residents may remain on duty for up to 6 additional hours to participate in didactic activities, maintain continuity of medical and surgical care, transfer care of patients, or conduct outpatient continuity clinics.
- During on-call hours residents should be provided with adequate sleeping, lounge, and food facilities. Back-up support systems must be provided so that patient care is not jeopardized during or following assigned periods of duty.
- Moonlighting that occurs within the residency program and/or the sponsoring institution or the non-hospital sponsor's primary clinical

site(s), ie, internal moonlighting, must be counted toward the 80-hour weekly limit on duty hours.

### **Duty Hours Exceptions**

**In accordance with ACGME Review Committee for Pediatrics, CNMC GMEC will not consider requests for exceptions to the 80 hour limit to a resident's work week.**

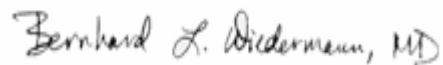
### **Oversight**

Program Directors are required to review their program's compliance of this policy with the Graduate Medical Education Committee.

Approved by CNMC GMEC: April 22, 2005

Modified: February 2006

Modified and approved by GMEC: November 2008



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Bernhard L. Wiedermann, M.D.  
Chair, GMEC