

**POLICY ON RESIDENT LEAVE FOR VACATION, EDUCATIONAL MEETINGS, PERSONAL CAUSES, MATERNITY/PATERNITY LEAVE, AND EMPLOYMENT INTERVIEWS
2015**

The physician in graduate medical education is caught between the demands of the student and the employee. The residency Review Committee of the Accreditation Council for Graduate Medical Education (ACGME-RRC) oversees adherence of each residency program to the requirements of ABOTO but also to the requirements of federal law pertaining to employees. The local circumstances in which this residency program functions also dictate how much and when leave may be taken.

The ABOTO Policy states the following:

"Leaves of absence and vacation may be granted to residents at the discretion of the Program Director in accordance with local rules. The total of such leaves and vacation may not exceed six weeks in any one year. If a circumstance occurs in which a resident's absence exceeds the allotted time outlined by the ABOTO, the program director must submit a plan to the ABOTO for approval on how the necessary training will be achieved, which may require an extension of the residency."

<http://www.aboto.org/pc-policies.html>

The Family and Medical Leave Act of 1993 (FMLA)

There are also laws that pertain to leave. Primary among these is the Family and Medical Leave Act of 1993. It provides protection for eligible employees to be absent from work, either intermittently or for an extended period, not required to be consecutive, up to a maximum of 12 weeks (emphasis added), for the following reasons: birth or adoption of a child; placement of a child in foster care; care for a seriously ill spouse, child, or parent; or a serious health condition that makes employee unable to perform his or her job.

The Eastern Virginia Medical School of Medicine Leave Policy – see GME Policies and procedures.

The Department of Otolaryngology Policies:

- ◆ The EVMS Department of Otolaryngology adheres to the leave policies as outlined by the Eastern Virginia Graduate School of Medicine.

A Clinical Practice of EVMS Medical Group

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Professor

ASSISTANT PROFESSOR

Kent Lam, MD
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Assistant Professor

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Barry Strasnick, MD, FACS
HEARING AND BALANCE CENTER
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Director
Stephanie Moody Antonio, MD, FACS
Nathan Michalak, AuD, CCC-A

LOCATIONS:

SENTARA NORFOLK GENERAL HOSPITAL RIVER PAVILION 600 GRESHAM DRIVE, SUITE 1100 NORFOLK, VA 23507 TEL 757.388.6200 FAX 757.388.6201
CHILDREN'S HOSPITAL OF THE KING'S DAUGHTERS (CHKD) 601 CHILDREN'S LANE NORFOLK, VA 23507 TEL 757.668.9327 FAX 757.668.9848
SENTARA PRINCESS ANNE 2075 GLENN MITCHELL DRIVE, SUITE 310 VIRGINIA BEACH, VA 23456 TEL 757.689.8500 FAX 757.301.2530

- ◆ The Department will observe all federal regulations regarding the taking of leave by a resident employee of the institution.
- ◆ The Program Director and Chairman will make every effort to ensure that no resident will inadvertently cause himself or herself to be ineligible for ABOTO certification through excessive leave from the program.

Specific Policies of the Department:

1. The Department recognizes that Residents in graduate medical education may decide to have children and thus become pregnant. This may involve the resident herself, or the spouse of a resident. The Department wishes to support a healthy pregnancy outcome for all concerned. After his wife's delivery, a resident may have a maximum of five (5) days of parental leave during the postpartum period. These five days are inclusive of weekend days/holidays and may begin either on the day of delivery or the days of discharge from the hospital after birth. This leave must be approved by the Program Director and is counted against the year's vacation or personal/discretionary leave time. Responsibility for nights on call is not waived, unless coverage is arranged. The Program Director may require the resident's presence for day time duty if conditions warrant such (i.e., illness of peers, unforeseeable causes or lack of physician coverage, or others).
2. Resident vacation consists of fifteen (15) weekday workdays per academic year.
3. Educational leave consists of eight (8) weekday workdays per academic year. Residents may have ten (10) weekday workdays of educational leave the year that they are applying for a fellowship or employment. They should plan to use educational leave and vacation for fellowship or employment interviews.
4. No more than five (5) weekdays may be used for vacation in any three-month period.
5. No more than five (5) weekdays may be used for educational leave in any three-month period.
6. Educational leave and vacation time may be used "back-to-back" only with the approval of the Chief Resident and the Residency Director.
 - 6a Two (2) Five (5) day vacations are allowed and one (1) five (5) day vacation may be split in half.
7. Weekend days and holidays may be added to vacations as permitted by the call schedule and with the approval of the Chief Resident.
8. Leave taken during away rotations (ENT Ltd. and PGY1 rotations) must be approved in writing by the rotation coordinator.
9. Except during major meetings, no more than two (2) residents should be on leave at any one time. Only one resident at a time may take leave from a given clinical service.
10. Leave may not be taken during mock oral examinations, graduation week, the last two weeks of June, and the first two weeks of July.
11. Personal and Discretionary Leave includes time for the following possible reasons:
 - ◆ Religious holidays.

◆ Weddings.

12. Time away for examinations, such as the USMLE Step 3, or to present papers or posters at sanctioned scientific meetings, is considered as educational leave. This time will not count against vacation time.
13. Attendance at funerals will also not be considered leave time.
14. The combined use of vacation, sick, maternity, paternity, adoption, and/or interview leave may not exceed thirty days of paid leave for any one academic year.

Every effort will be made to provide for a short leave to encompass either Christmas or New Year's Day, for all Residents. Eligibility for this leave time must be earned by the whole complement of Residents by meeting performance expectations in both the service and education components of the resident's work.

The Department Chairman and Residency Program Director wish to be as reasonable as possible in the granting of leave. To do so, there must be notification of leave four (4) weeks prior to requested educational or vacation leave through submission of signed request form to the program director or chairman. There must also be an understanding of the nature of clinical practice, which demands consideration of patient care and safety to be of utmost importance. Thus, we must consider not only the needs of each individual resident, but also the needs of the clinical services to which the Residents contribute so much. To that end, we must ensure that vacation leave is distributed as evenly as possible across the entire twelve months of the academic year, taking into account the above-mentioned restrictions.

The Department Chairman and/or Residency Program Director are the final arbiters in questions arising from this policy. The goal of this policy is to be liberal and fair to all concerned, while taking into account the guidelines of the ABOTO and the ACGME-RRC. All Residents must be responsible towards the ABOTO and the ACGME-RRC guidelines, to their training, to the EVMS Otolaryngology Residency Program, and to their peers. This spirit of cooperation and responsibility should help all interested parties avoid major problems regarding leave policy.