

**Policy and Procedure Manual  
Administrative Manual  
Administrative Institutional  
Department: Graduate Medical Education (GME)**



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**ACGME Trainee Clinical  
and Educational Work  
Hours**

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**I. PURPOSE / BACKGROUND**

Work hours are defined as time spent by Trainees on all clinical and academic activities related to the program: patient care (inpatient and outpatient); administrative duties relative to patient care; the provision for transfer of patient care; time spent on in-house call; time spent on clinical work done from home; and other scheduled activities, such as conferences. These hours do not include reading, studying, research done from home, and preparation for future cases. This policy applies to all Trainees when assigned to any other institution or clinical site as a part of their GME program.

**II. POLICY**

The Program Director is responsible for monitoring and enforcing compliance with work hour guidelines. All programs must design an effective program structure, providing Trainees with both educational opportunities and reasonable opportunities for rest and well-being while adhering to the following:

- A. Trainees must be given the opportunity to attend medical, mental health, and dental care appointments, including those scheduled during their working hours.
- B. Trainees are responsible for accurately logging their work hours in [New Innovations](#). Hours should be logged weekly.
- C. Clinical and educational work hours must be limited to no more than 80 hours per week, averaged over a four-week period, inclusive of all in-house clinical and educational activities, clinical work done from home, and all moonlighting (see ACGME Moonlighting policy).
- D. Trainees should have eight hours off between scheduled clinical work and education periods. If a Trainee opts to stay to care for patients or return to the hospital with fewer than eight hours free of clinical experience or education, this must occur within the context of the 80-hour and one-day-off-in-seven requirements.
- E. Trainees must have at least 14 hours free of clinical work and education after 24 hours of in-house call.
- F. Trainees must be scheduled for a minimum of one day in seven free of clinical work and required education (when averaged over four weeks). At-home call cannot be assigned on these free days.
- G. Clinical and educational work periods for Trainees must not exceed 24 hours of continuous

scheduled clinical assignments. Up to four hours of additional time may be used for activities related to patient safety; however, additional patient care responsibilities must not be assigned to a Trainee during this time.

- H. In rare circumstances, after handing off all other responsibilities, a Trainee, on their own initiative, may elect to remain or return to the clinical site in the following circumstances:
  - 1. To continue to provide care to a single severely ill or unstable patient;
  - 2. Humanistic attention to the needs of a patient or family; or,
  - 3. To attend unique educational events

These additional hours of care or education will be counted toward the 80-hour weekly limit.

- I. Moonlighting must not interfere with the ability of the Trainee to achieve the goals and objectives of the educational program and must not interfere with the Trainees' fitness for work nor compromise patient safety. Time spent by Trainees in internal and external moonlighting must be counted toward the 80-hour maximum weekly limit.
- J. In house night float must occur within the context of the 80-hour and one-day-off-in-seven requirements.
- K. Trainees must be scheduled for in-house call no more frequently than every third night (when averaged over a four-week period).
- L. Time spent on patient care activities by Trainees on at-home call must count toward the 80-hour maximum weekly limit. The frequency of at-home call is not subject to the every-third-night limitation, but must satisfy the requirement for one day in seven free of clinical work and education, when averaged over four weeks. At-home call must not be so frequent or taxing as to preclude rest or reasonable personal time for each Trainee.
- M. Trainees are permitted to return to the hospital while on at-home call to provide direct care for new or established patients. These hours of inpatient patient care must be included in the 80-hour maximum weekly limit.
- N. Program Directors must investigate and comment on the duty hour violation in New Innovations within 3 business days of the notification.
- O. Program Directors must establish back-up support systems when patient care responsibilities are unusually difficult or prolonged, or in unexpected circumstances lead to Trainee fatigue where the Trainee is unable to perform their duties.
- P. All programs must have a policy for clinical and educational work hours that, at a minimum, meet the ACGME's institutional and program requirements. Additionally, Program Directors must ensure adequate supervision of Trainees by a qualified Attending credentialed by Medical Staff Services in compliance with Institutional and Program level Supervision policies.

Work hour concerns or non-compliance can be reported to the DIO at (626) 218-6010 or [GME\\_Office@coh.org](mailto:GME_Office@coh.org). If you wish to leave an anonymous message, please call the GME Hotline at (626) 218-2133.

**Policy History:**

Reviewed: 11/07; 11/08; 11/09; 11/09/10; 11/16/11; 01/13/16

Revised: 07/30/11; 11/07/11; 11/08/11; 02/15/12; 03/09/16

**References:**

1. ACGME Common Program Requirements (Effective 7/1/2022)
2. ACGME Glossary of Terms (4/2020)
3. Medical Staff Bylaws and Rules and Regulations

**Related Policies:**

1. ACGME Moonlighting Policy
2. GME Supervision of Trainees Policy
3. GME Transitions of Care Policy
4. GME Well-Being Policy

**Appendix One – Acronyms, Terms and Definitions Applicable to this Policy**

1. **ACGME** – The Accreditation Council for Graduate Medical Education is responsible for the accreditation of post-physician medical training programs within the United States. Accreditation is accomplished through a peer review process and is based upon established standards and guidelines.
2. **Clinical and Educational Work Hours (or “Work Hours,” formerly known as Duty Hours)** – All clinical and academic activities related to the residency or training program, i.e. 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 academic assignments such as conferences.
3. **Designated Institutional Official (DIO)** – The individual in a sponsoring institution who has the authority and responsibility for all ACGME-accredited GME programs.
4. **In-House Call** – Duty hours beyond the normal workday where Trainees are required to be immediately available in the assigned institution.
5. **New Innovations** – Evaluation system that allows for online completion of evaluations by faculty and house staff as well as duty hour tracking.
6. **Program Director** – The designated person accountable for the Program; this person must be selected by the Designated Institutional Official and possess qualifications acceptable to the appropriate Residency Review Committee (RRC) of the ACGME programs.
7. **Qualified Medical Staff Member** – Medical Staff members who have received a formal assignment to teach resident/fellow physicians as outlined in ACGME Program Requirements.
8. **Trainee** – A Resident or Fellow engaged in an ACGME approved-training or subspecialty program, which may be practicing at the Hospital in connection with an approved Affiliation Agreement governing their training at the Hospital.