Department of Family Medicine

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<tr>
<th>Policy Name:</th>
<th>Sick call and afterhours for OB and Hospital Service call for TOH affiliated residents</th>
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<tr>
<td>Approved:</td>
<td>Residency Program Committee</td>
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<td>Approved By:</td>
<td>Residency Program Committee</td>
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<tr>
<td>Date Last reviewed:</td>
<td>February 2, 2023</td>
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<td>Scheduled review date:</td>
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Purpose:

To provide clear communication channel when a resident can no longer cover call after hours or during the week. While in the case room or on Hospitalist, the Family Medicine resident is an integral part of the team with dedicated roles and responsibilities.

This policy is not meant to assign more importance to the inpatient services over community but rather to reflect increasing levels of medical acuity requiring medical attention.

Policy:

Once the call schedule is finalized and distributed, if the resident assigned to cover OB case room or FM Inpatient Unit is unable to fulfill this duty for any valid reason, the call coverage responsibility is transferred to the resident assigned to FM Community call as detailed below.

Absences for inappropriate reasons will be reflected as professionalism flags.

The resident who is unable to fulfill their call is expected to be scheduled again at a later date.

If a resident is unable to do their call for OB/FM Hosp:

1. **The Resident who is unable to do the call must:**
   1. Call and talk to the resident on community call to notify them that they will now need to cover the call shift at night and ensure they are eligible.
      1. OB - this means the resident being pulled has completed at least one OB buddy shift
      2. HOSP - this means the resident being pulled has completed at least one block of Hosp or CTU. At the Civic, Geriatrics is also an appropriate rotation to render the resident eligible for Hosp call.
      3. BCT or elective residents CANNOT cover OB or HOSP in any circumstances
   b. Call and talk to the FM Staff physician on call, and for
i. OB, contact the L&D floor and overnight resident to update them. If it’s 24 hour fly in call, OB coverage by community call resident will start as of 7 pm.
c. Email the FM chief residents so they can update the schedule, and as an FYI, copy the FM unit coordinator and administrator who distributed the call schedule.

The Resident who is replacing must:
   a. **Call** and talk to the staff on community call that day to inform them of the change. The staff will then take over first call for the community. A resident will NOT be required to be on call for OB or HOSP and the community at the same time.
   b. **Call** locating to inform them of the call change and that the staff physician will be first call.
   c. Notify their home clinic, supervisor, and coordinator as per their clinic procedures if a clinic needs to be cancelled because of post call. Ensure to note if any of the patients being seen are considered urgent/time sensitive or not.

**Afterhours Clinic Notes for FHT residents:** If call interferes with an afterhours clinic, **Call** the clinic supervisor to inform them of the change. The physician covering the Saturday/Evening clinic will be responsible to run the clinic without a resident.

**Applicability:** This policy applies to all residents affiliated to the Ottawa Hospital