

Department of Family Medicine

Policy Name:	TOH Obstetrical unit/FM inpatient unit coverage
Approved By:	Resident Program Committee (RPC)
Date Last reviewed:	Sept 5, 2024
Contact Department:	P/G Program Manager dfmpgmanager@uottawa.ca

****Adapted for Civic/Riverside sites from the Department of Family Medicine policy “Sick call and afterhours for OB and Hospital Service call for TOH affiliated residents”**

Purpose:

To provide clear communication channel when a resident can no longer cover call after hours or during the week due to acute illness. This policy does not apply in cases of prolonged absences or accommodations. 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 due to acute illness, the call coverage responsibility is transferred to the resident assigned to FM Community call as detailed below. This policy does not apply in cases of prolonged absences or accommodations.

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 ON A WEEKEND:

- 1. The Resident who is unable to do the call must:**
 - a. Call and talk to the resident on community call to notify them that they will now need to cover the call shift and ensure they are eligible (see *Eligibility below).
 - b. Call the nurse care facilitator on the L&D floor for OB or FM Hosp staff physician and inform them that they are not able to do the call and provide the info of the resident will be replacing you.
 - c. Email the chief resident, unit program coordinator and the administrator who distributed the call schedule informing them of the change in coverage
- 2. The Resident who is replacing must :**

- a. Call 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 FM Inpatient Unit and the community at the same time.
- b. Call TOH locating to inform them of the call change and to make them aware of the staff physician who is now first call.
- c. Notify their home clinic, supervisor and unit program coordinator as per their clinic procedures if a clinic needs to be cancelled because of post call.
- d. If call interferes with a Saturday clinic, call the Saturday clinic supervisor to inform them of the call change. The physician covering the Saturday clinic will be responsible to run the clinic without a resident.

HOSP: Call coverage will be from 8am- 8am. Residents are expected to stay for rounding on any given day. Weekend rounding start times can often be at the discretion of the Hosp staff physician and it is recommended to connect with your staff regarding this.

OB: Coverage is 7am-7am on weekends.

Monday will be a post call day for residents on call on Sunday.

If a resident is unable to do their OB/FM hosp call on a **WEEKDAY**:

3. The Resident who is unable to do the call must:

- a. Call and talk to the resident on community call to notify them that they will now need to cover the call shift and ensure they are eligible (see *Eligibility below).
 - i. Coverage for OB/FM hosp will only start as of 6pm (Hosp) or 7pm (OB) after FM afternoon clinic is finished.
- b. Call the nurse care facilitator on the L&D floor for OB or FM Hosp staff physician and inform them that they are not able to do the call, that resident coverage will resume at 6pm (Hosp) or 7pm (OB) and inform them of who will be replacing them.
- c. Email the chief resident, unit program coordinator and the administrator who distributed the call schedule informing them of the change in coverage

4. The Resident who is replacing must :

- a. Call 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 FM Inpatient Unit and the community at the same time.
- b. If the call changes occur after 4 pm: Call TOH locating to inform them of the call change and to make them aware of the staff physician who is now first call. If the call schedule has been updated with the changes by 4 pm, this step can be omitted.
- c. If resident was assigned to an evening clinic, they are to call the evening clinic supervisor to inform them of this change. The physician covering the evening clinic will be responsible to run the clinic without a resident.
- d. The resident covering OB/FM hosp will be post call the next day and should notify their home clinic, supervisor and unit program coordinator as per their clinic procedures if a clinic needs to be cancelled.

HOSP: Call coverage will be 6pm to 8am (Monday to Friday) and residents are expected to stay for rounding.

OB: Call coverage will be from 7pm to 7am (Monday to Friday)

***Eligibility:**

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