

Clerkship Duty Hours Policy

Office of Accountability:	Associate Dean, MD Program, Faculty of Medicine & Dentistry
Office of Administrative Responsibility:	MD Program
Approver:	MD Curriculum & Program Committee
Scope:	Compliance with this policy extends to all members of the clinical team community.

Overview

The *Post-Secondary Learning Act* of Alberta gives General Faculties Council (GFC) responsibility, subject to the authority of the Board of Governors, over “academic affairs” (Section 26(1)).

Purpose

1. To ensure the MD Program is definite in its institutional setting, educational program for the MD degree, medical student services, faculty and educational resources that meets or exceeds the **Committee on Accreditation of Canadian Medical Schools (CACMS)** accreditation standards.

Standard 8.8 MONITORING TIME SPENT IN EDUCATIONAL AND CLINICAL ACTIVITIES: The curriculum committee and the program’s administration and leadership implement effective policies and procedures regarding the amount of time medical students spend in required activities, including the total number of hours medical students are required to spend in clinical and educational activities during required clinical learning experiences.

2. To ensure the MD Program is rooted in the **Association of Faculties of Medicine of Canada’s (AFMC)** articulated social accountability mission for Canadian medical schools that meets or exceeds **The Future of Medical Education in Canada (FMEC): A Collective Vision for MD Education’s** recommendations.

POLICY

1. RESPONSIBILITIES

Clinical duty hours are congruent with **Provincial Association of Resident Physicians of Alberta (PARA)**.

2. DUTY HOURS

a. In-House Call

- i. In-house call is a maximum on a one-in-four (1:4) basis. Based on 28 day blocks, the number of days on service are as follows:

- 1-6 days on service	- 1 in-house call
- 7-10 days on service	- 2 in-house calls
- 11-14 days on service	- 3 in-house calls
- 15-18 days on service	- 4 in-house calls

- 19-22 days on service - 5 in-house calls
 - 23-26 days on service - 6 in-house calls
 - 27-30 days on service - 7 in-house calls
 - 31-34 days on service - 8 in-house calls
- ii. No medical student shall be scheduled for in-house call duty on any portion of more than two weekends out of any four weekends.
 - iii. Sign-over of patient care responsibilities and pertinent patient information shall begin no later than the 24th consecutive hour of duty. Apart from handover of patient care responsibilities, no medical student shall be required to assume new clinical responsibilities following the 24th hour of duty. Such handover shall not exceed two hours.
- b. Home Call
- i. Home call is on a one in three (1:3) basis. The number of days on service are as follows:
 - 1-5 days on service - 1 home call
 - 6-8 days on service - 2 home calls
 - 9-11 days on service - 3 home calls
 - 12-14 days on service - 4 home calls
 - 15-17 days on service - 5 home calls
 - 18-20 days on service - 6 home calls
 - 21-23 days on service - 7 home calls
 - 24-26 days on service - 8 home calls
 - 27-29 days on service - 9 home calls
 - 30-32 days on service - 11 home calls
 - ii. Any medical student on home call who stays in or returns to the hospital to attend to a patient between the hours of 12:00 am and 6:00 am is entitled to relieve themselves of all clinical responsibilities immediately after handover of patient care responsibilities. Handover shall commence no later than the 24th hour of duty and shall not exceed two hours.
- c. Other
- i. A medical student is only required to be on call until 6:00 pm (1800 hours) the night before an examination.
 - ii. A medical student is not to be on call past 10:00 pm (2200 hours) on the last night of their rotation.
 - iii. A medical student is not to be on call past 10:00 pm (2200 hours) on the night prior to a MED 531 or MED 541 course session.

DEFINITIONS

Any definitions listed in the following table apply to this document only with no implied or intended institution-wide use. [▲Top]	
Committee on Accreditation of Canadian Medical Schools (CACMS)	The Committee on Accreditation of Canadian Medical Schools (CACMS) ensures that Canadian medical faculties' MD programs meet the quality expected when producing tomorrow's doctors. Medical schools demonstrating compliance are afforded accreditation, a necessary condition for a program's graduates to be licensed as physicians.

Association of Faculties of Medicine of Canada (AFMC)	The Association of Faculties of Medicine of Canada (AFMC) represents Canada's 17 faculties of medicine
The Future of Medical Education in Canada (FMEC): A Collective Vision for MD Education	The FMEC project of the Association of Medical Faculties of Canada is meant to ensure that, in the face of Canada's ever-changing society and resulting healthcare needs, medical students in Canada continue to receive the best education possible. It is meant to lead to a medical education system that can better meet the needs of Canadians, both now and into the future.
Provincial Association of Resident Physicians of Alberta (PARA)	The Professional Association of Resident Physicians of Alberta is a non-profit organization that endeavors to provide effective representation for physicians completing further training in a residency program.

RELATED LINKS

Association of Faculties of Medicine of Canada (AFMC)
Committee on Accreditation of Canadian Medical Schools (CACMS)
The Future of Medical Education in Canada (FMEC): A Collective Vision for MD Education
Liaison Committee on Medical Education (LCME)
Provincial Association of Resident Physicians of Alberta (PARA)

APPROVER	STATUS	DATE
MD Program Committee	Approved	25 July 2013
Kent Stobart, associate dean, MD Program	Added definitions. Updated related links section.	26 February 2014
MD Curriculum & Program Committee	Approved	18 January 2018
Dr. Tracey Hillier, Associate Dean, MD Program	removed LCME and updated formatting for consistency	2 June 2020