

POLICY ON VACATION

This policy applies to all graduate medical education (GME) residency or fellowship programs regardless of accrediting body or status. Note the term resident refers to both specialty and subspecialty fellows.

1. All residents and fellows are eligible to receive up to 20 weekdays of paid vacation each academic year, effective 7/1/2023.
2. Two December holiday blocks are designated by the Central GME Office each year.
 - a. Programs assign vacation for one of the two blocks to each resident.
 - b. Resident may opt out of taking a holiday block vacation.
 - c. Weekdays during the holiday block count as vacation days.
3. In general, no vacation will be scheduled for greater than 5 weekdays.
4. Vacation time is not transferable from one academic year to the next academic year.
5. Vacation time is not banked and cannot be “cashed out.”
6. Vacation time balances are not paid out upon separation from employment.
7. Programs are responsible for tracking and documenting vacation days and other time away from training (leave, CME, etc.) and ensuring trainees receive information regarding specialty/subspecialty certifying board and other pertinent requirements for attendance for each year and over the course of training.
8. Residents are responsible for understanding the criteria for satisfactory completion of their specific specialty/subspecialty training, the eligibility requirements for participation in certifying examinations by their relevant certifying boards, and the impact of combined forms of time away on timing of eligibility.
9. Generally, vacation should not be taken during the last 15 days of June or first 15 days of July and should be limited to residents transitioning to fellowship at the Program Director’s discretion. However, the PD has latitude to allow vacation during this time in the case of extraordinary circumstances.
10. Vacation will be scheduled on a first come, first serve basis. No more than one week of cumulative vacation should be taken from any rotation of three months or less total duration during the first two years of training.
11. No vacations will be taken on the following rotations:
 - a. Internal Medicine: ICU, DHU, Inpatient Service
 - b. Emergency Medicine: On months when ten or fewer interns are assigned.
 - c. OB (Intern): On months when four (4) or fewer interns are assigned (this occurs infrequently)
 - d. Pediatrics: NICU, PICU, Wards (Chips A & B)
 - e. Family Medicine: Inpatient Service by upper-level residents
 - f. Psychiatry: BHC Inpatient Psychiatry Services
12. Process
 - A. Formal request must be given to the resident's department and the department sponsoring the rotation at least 90 days prior to the first of the month in which the vacation is to be taken. Program Director has the discretion to require less than a 90-day notice.

Notification of request should include:

 - Chief Resident or other responsible physician of assigned service during the time of the request.
 - Program Director of resident or fellow’s training program
 - Residency Coordinator of resident or fellow’s training program
 - B. Vacation days must be recorded in Med Hub by program’s designated individual.
 - C. Residents should consult their specific program policies/process for additional details.

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Date

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