

Department of Orthopaedic Surgery Resident Fatigue Policy

The Department of Orthopaedic Surgery follows the University policy for Fatigue: Faculty and residents shall be educated to recognize the signs of fatigue. Policies and procedures shall be developed to prevent and counteract the potential negative effects of fatigue. Every faculty member and resident will sign receipt and understanding of the policy.

Fatigue Awareness and Prevention Policy

There is a growing awareness that fatigue has an adverse effect on performance. Symptoms of fatigue and/ or stress are normal and expected to occur periodically during residency as well as after, just as it would in other professional settings. In residency training, impaired performance means missed opportunities for learning, and, worst case scenario, potential harm to patients.

UCSD Resources:

- Fellow resident
- Administrative chief resident
- Attending physician
- Program Director (pager 24 hours/day 619-290-4093)
- Physicians well-being: confidential:
http://www-ucsdhealthcare.ucsd.edu/physicians_well_being/index.htm

The Physician Well-Being Committee is dedicated to recognizing and offering assistance to staff physicians who have problems with substance abuse or physical or mental illness, which impair their ability to practice safely and effectively. Confidentiality will be assured depending upon the severity of the situation and the immediate risk to patient safety. If you are anxious about making this first call, you may want to contact the committee Chair initially without disclosing the name of your colleague, just to learn more about how the committee can help. For 24-hour assistance, please call the UCSD Page Operator and ask for the physician on call for the Physician Well-Being Committee.

Chair, Physician Well-Being Committee

Contact Shannon Chavez, MD
(619) 497-6665 (office)
(858) 616-1123 (digital pager)

Physician Well-Being Committee Members

Available through the UCSD Page Operator at (619) 543-6737

- Joyce Adams, MD/Pediatrics-Adol Med
- Ellen Beck, MD/Family Practice
- Shannon Chavez, MD/Psychiatry
- Pam Jong, MD/Internal Medicine
- Chris Mathews, MD/Internal Medicine
- William Norcross, MD/Family Medicine
- Richard Prather, MD/Psychiatry
- Shannon Robinson, MD/Psychiatry
- Robin Seaberg, MD/Anesthesiology

Fatigued Residents Typically Have Difficulty With:

- Appreciating a complex situation while avoiding distraction
- Keeping track of the current situation and updating strategies
- Thinking laterally and being innovative
- Assessing risk and/ or anticipating consequence
- Maintaining interest in outcome
- Controlling mood and avoiding inappropriate behavior

Signs of Fatigue Include

- Involuntary nodding off
- Waves of sleepiness
- Problems focusing
- Lethargy
- Irritability
- Mood lability
- Poor coordination
- Difficulty with short-term recall
- Tardiness or absences at work
- Inattentiveness to details
- Impaired awareness (fall back on rote memory)

High Risk Times For Fatigue-Related Symptoms

- Midnight to 6 am
- Early hours of day shift
- First night shift or call night after a break
- Change of service
- First 2 to 3 hours of a shift or end of shift
- Early in residency or when new to night call

Moves To Limit Fatigue-Related Problems Include:

- 80 hour work week
- Residency workload that has as little variation as possible in work schedule
- Many physical illnesses can present as fatigue and should be ruled out when daytime fatigue seems out of proportion to the resident workload
- Medical evaluation with possible sleep study
- Depression and other psychiatric syndromes may first be manifest as fatigue. Proper diagnosis and treatment are needed

Response

Excess fatigue and/ or stress may occur in patient care settings as well as non-patient care settings such as lecture and conference. In patient care settings, patient safety and well-being of the patient mandates implementation of an immediate and proper response sequence. In non-patient care settings, the response may vary based on the severity of and the demeanor of the resident's appearance and perceived condition.

The following is a general guideline for those recognizing or observing excessive resident fatigue and/ or stress.

Patient care

- Attending physician:
 - If the attending physician or supervising resident notices evidence of excessive fatigue and/ or stress, the resident should be released from any further patient care responsibilities at time of recognition.
 - The attending or supervising resident should privately discuss his/ her opinion with the resident, attempt to identify the underlying reason for the fatigue, and discuss the amount of rest needed to alleviate the situation.
 - The attending or supervising resident must contact the resident on call (or back up if the involved resident is on call), program director and/ or chairman to inform them of the situation as well as underlying issue.
 - The resident should rest at the hospital (call room) prior to driving home. In addition, the resident should be advised that someone may pick him/ her up for transportation home.
 - The resident who has been released from further patient care cannot appeal the decision and must have permission to resume work from the supervising attending.
- Residents
 - Other residents who notice a colleague's fatigue have the professional responsibility to notify the supervising attending or chief resident without fear of reprisal.
 - A resident who feels fatigued has the professional responsibility to notify the supervising attending or chief resident without fear of reprisal.
- Program Director/ Chairman
 - If the removed resident's absence results in immediate effect on other residents (ie call) this should be accounted for immediately
 - The resident's call schedule, time cards, patient care responsibilities, and personal problems/ stressors will be discussed.
 - The rotation will be reviewed for potential changes and improvements.
 - If the problem is recurrent or not resolved in a timely manner, the resident may be removed from patient care responsibilities indefinitely. A medical evaluation may be requested as well as a meeting with Physicians well-being.

FATIGUE AWARENESS AND PREVENTION

I have read, understood, and agree with all the above information. I also acknowledge that I have received the booklet, "Fight Fatigue: A Training Handbook for Resident".

Printed Name

Signature

Date