

ADMISSION, SUPERVISORY AND CENSUS CAPS

This policy is designed to:

- a. Limit the number of admissions to an individual R-1 resident.
 - b. Avoid excessive workloads for an individual on the service.
 - c. Ensure adequate resident cross-coverage for the R-1 residents.
 - d. Limit the number of primary admissions to an upper level resident.
1. An R-1 resident will admit no more than five (5) patients while on-call (24-hour period) and/or no more than eight (8) new patients in a 48 hour period at UMMC or the VA.
 - a. At Mercy Medical Center, the R-1 resident will admit no more than five (5) patients plus one (1) transfer patient while on call (24-hour period) and/or no more than eight (8) new patients in a 48 hours period.
 - b. If the R-1 resident has taken less than five (5) admissions, but these patients are deemed by the team or cross covering resident to be complex, the supervising resident may redistribute these patients to other R-1 residents on the team.
 2. The upper level resident will be responsible for admitting no more than 10 new patients per admitting day and no more than 16 new patients in a 48-hour period. This cap includes the first-year resident's patients being supervised.
 - a. At the VA hospital on Fridays and Saturdays, the long call resident can admit 10 new patients (ED or outside transfers) and 2 unit transfers.
 - b. At Mercy, the upper level resident can admit up to 10 new patients (ED or outside transfers) and 2 in-house transfers. Patients transferred from the Transitional Care Unit at Mercy count as new admissions for interns and residents.
 3. A primary resident, usually an R-1, will not care for more than 10 patients at any one time. If the resident will exceed this cap or has less than 10 but these patients have a large number of complex medical illnesses, the team resident will reassign the patient(s) to another R-1 resident on the same service.
 4. When supervising more than one R-1 resident, the upper level resident must be responsible for the ongoing care of no more than 20 patients at the VA or Mercy and no more than 18 patients at UMMC.
 5. Night Float, NACR and Day Float rotations are shift work. Hence these rules are modified for these rotations:
 - a. Interns will admit up to 5 patients per shift.
 - b. Residents will supervise up to 10 patients per shift (except as noted above for the VA on Fridays and Saturdays and for Mercy).
 6. The Day Float will admit all new patients between 7 PM and 9 PM at UMMC and the VA. The Night Team will admit all patients between 9 PM and 7 AM at UMMC, the VA and Mercy. These patients will be re-distributed to the day teams in the morning.
 7. Summary of team caps
 - a. Floor teams
 - i. UMMS – Med-1,2,3,4, Med-ID 18 patients
 - ii. VA – Yellow, Green, Orange, Purple 20 patients
 - iii. Mercy A,B,C,X,Y 20 patients
 - iv. Combined Solid and Leukemia 28 patients total (with clinical exceptions)
 - b. ICU's
 - i. Combined CCS + PCS 33 patients (with clinical exceptions)
 - ii. MICU A and B 29 total (soft cap of 16/team)
 - iii. VA – Pink 14 patients
 - iv. VA – Blue 20 patients