

NACR and NIGHT FLOAT RESPONSIBILITIES SIGN-OUT AND SIGN-IN PROCEDURES

This policy is designed to:

1. Delineate the clinical and administrative responsibilities of the Night Acting Chief Resident, University Night Float resident and intern.
2. Ensure adequate and appropriate supervision of all the medical teams at night.
3. Delineate responsibility between a R-3 Night Acting Chief Resident and an R-2 University Night Float resident.
4. Ensure appropriate transfer of information about patient care between residents working day and night shifts.
5. Provide guidelines for the amount and type of data that should be presented at sign-in or sign-out rounds.

1. The Night Acting Chief Resident will:

- a. Be a senior resident who will be on duty from 9pm until 10am. Sunday through Thursday nights for two weeks.
- b. Be off duty from Friday morning until 9pm Sunday night.
- c. Be primarily responsible for supervising the entire night float team.
- d. Complete urgent medical consultations when there is not an R-2 University Night Float resident present.
- e. Ensure that patient care is appropriate and that the workload is reasonably distributed between the members of the night team.
- f. Evaluate all admissions to the medical service.
- g. Take admissions until 6:30am.
- h. Not exceed 10 admissions in one night.
- i. Work with the Nursing Services Coordinator to resolve any issues regarding the assignment of patients to the medical services.
- j. Function as the liaison to the Emergency Department regarding the initial evaluation and management of patients admitted to the medical services.
- k. Attend morning report daily.
- l. Be present for intern presentations the following morning if deemed necessary.
- m. Present admissions on days when R-1 residents are switching to a new in-patients service to allow the R-1 interns.
- n. Meet with the associate program director once a week following morning report to review medical consults, supervisory issues, etc.
- o. Share the above responsibilities when on with another R-3 as University Night Float resident.

2. The R-2 University Night Float resident will:

- a. Be a junior resident who will be on duty from 9pm until 10am. Sunday through Thursday nights for two weeks.
- b. Be off duty from Friday morning until 9pm Sunday night.
- c. Be primarily responsible for supervising cross cover duties.
- d. Complete emergent medical consultations.
- e. Attend morning report daily.
- f. Be allowed to supervise admissions if the resident elects to and will be present for intern presentations the next morning for the admissions that the resident supervised.
- g. Admit patients on their own in the event that both night float interns have reached their admission cap.
- h. Meet with the associate program director once a week following morning report to review medical consults, supervisory issues, etc.

3. The R-1 night float intern will:
 - a. Be the intern on duty from 9pm until 10am Sunday through Thursday nights.
 - b. Be off duty from Friday morning until 9pm Sunday night.
 - c. Admit patients to the ward teams (long call and/or short call teams).
 - d. Admit to the Med ID service if the Med ID intern has capped (up to 5 admissions or as many as the Med ID team cap will allow – see Med ID section for details).
 - e. Present patients admitted by the night team to the respective ward teams.
 - f. Cross cover patients on the medical services and carry out duties as signed out by the ward teams.
 - g. Will not exceed 5 admissions during one shift.
 - h. Attend morning report daily prior to presenting new patients to the ward teams.
4. Every team will meet for sign-out rounds in the late afternoon, preferably between 4-5 p.m. but not later than 6 p.m., to review patient management issues. Sign-out rounds are conducted by the supervising residents and at his/her discretion will include the following:
 - a. Review of each patient's progress during the day.
 - b. Review of pertinent lab data and results of studies.
 - c. Discussion of potential problems that may arise in the near future.
 - d. List of items that must be completed by the on-call R-1 resident.
5. Each R-1 resident will complete a Night Float Sign-out Sheet that details each of his/her patient's major diagnoses and relevant clinical information. This might include:
 - a. When to do a fever work-up.
 - b. Potential complications that may occur that night.
 - c. Lab data or studies that must be checked and acted on, if necessary.
 - d. Procedures that must be done that night. Whenever possible, these procedures should be done during the day and not be left to the Night Float resident.

Discussed at Town Meeting: 12/14/94 and May, 1998
Updated 8/2005, 7/2007, 6/2009