

Vacation/Absence Policy

Policy

- **Didactic Phase**

Time off during the Didactic Phase is determined by the academic calendar.

- **Clinical Phase**

During the Clinical Phase of the program, nurse anesthesia residents follow a Clinical Practicum Schedule. Clinical Anesthesia Practicum courses end at midnight of the night before the first day of the semester, and the next clinical practicum course begins at 0001 am on the first day of the semester. This exposes residents to a wide depth and breadth of cases needed to meet the case numbers and hours required to graduate. The Clinical Practicum Schedule begins at the end of the didactic phase (summer semester) as residents have electronic medical record orientation, American Heart Certification renewals, orientation to their primary clinical site, observation experiences, physical assessment to complete, etc.

Each DNP resident has 20 personal/vacation days to use as they wish or need to during the clinical phase of the Nurse Anesthesia Program and 5 research/study days are attached to the Clinical Correlation Conference Seminars scheduled each semester of full-time clinical practicum. In addition, DNP residents have an earlier December date off of their graduating year that shall be determined by the Program Director. Residents should follow the clinical site scheduling policy, scheduling personal, vacation and research days **in advance**, following clinical site policy, with their Clinical Coordinator or clinical site scheduler. Residents are recommended to schedule a minimum of 5 vacation/personal/research days each quarter of the year (January-March, April-June, July-September, October-December).

Vacation/personal/research days are not allowed in the first month of the clinical phase.

Vacation/personal/research days are strongly discouraged during the first two weeks of any rotation. Residents should not exceed 5 vacation/personal/research days during any specialty/enrichment rotation such as rural or pediatrics rotations. Residents should not exceed 5 vacation/personal/research days in the last month of the clinical phase. Residents are not allowed to request or schedule themselves off for successive Mondays and/or Fridays.

- **Holidays**

Residents should follow the clinical site holiday policy. Holidays or closings scheduled by the clinical site do not result in the loss of personal/vacation time. However, residents are required to use vacation days to be absent on a holiday not observed by the clinical site.

- **Illness/Family Emergency**

Residents are allowed not more than five (5) unscheduled absences (call-ins) during the clinical phase. Unexpected absence is a hardship for the remaining members of the anesthesia team. Avoid calling in sick unless unable to safely administer anesthesia care or to avoid transmission of disease to patients and staff. Practice wellness, seeking appropriate medical care as early as possible. Follow the clinical site absence policy, notifying appropriate personnel as early as possible (no less than two hours before).

Absence from a regular shift requires the use of one vacation day. Absence from a call shift requires the use of two vacation days. If a resident misses a call shift, they are expected to work the post-call day. Missed call shifts must be made up by scheduling the make-up call shift with the Clinical Coordinator.

Loss of vacation or personal time can be avoided by making up the shifts, scheduling with the Clinical Coordinator. If a resident misses more than 20 days (DNP) of clinical, days may be made up during the clinical phase, or the resident may request an extension. However, the program is under no obligation and does not guarantee clinical site availability for extensions due to the limited availability of clinical sites for residents. The program does not set up new clinical sites at the request of individual residents.

- **Bereavement/Funeral Leave**

Residents must use personal/vacation days.

- **Optional Activities**

Job interviews and attending review courses are optional activities for residents and count as personal/vacation days. Travel days for optional activities are personal/vacation days.

- **Mandatory Activities**

Mandatory activities required of the program do not count against the student's personal/vacation time. For example, residents must attend one full state or national conference during the program, and because this is a requirement, conference days do not count as vacation days. Clinical Correlation Conferences are also mandatory requirements of the program and do not count as personal/vacation days. Travel days to attend mandatory requirements of the program do not count as personal/vacation days. Residents are also allotted one day to take each of the two mandatory SEE Exams.

- **Mission Trips**

Mission trips are elective and therefore, residents are not allowed to attend mission trips during the didactic phase of the program. During the clinical phase, one mission trip is allowed with prior approval and discussion with the Program Director. Residents must use days from their

personal/vacation allotment. Per COA guidelines, cases and hours completed while on a mission trip cannot be counted toward graduation requirements.

- **Health and Safety**

Residents are expected to maintain up-to-date Health and Safety requirements. Residents may not attend clinical while out of compliance. A personal/vacation day will be deducted for each clinical day missed until proof of compliance is submitted.

See NAP Policy C2 Credentialing at Clinical Sites.

Overall Program

- **Jury Duty**

Residents called to Jury Duty should notify the Program Director and Registrar immediately, providing the court's name and address, to obtain a letter requesting dismissal from the court until the education program is completed.

- **BLS/ACLS/PALS**

Residents are required to keep their American Heart Association (AHA) BLS, ACLS, and PALS certifications up to date throughout the program and through the time period they will be taking their National Certification Examination. Residents are encouraged to update their certifications before the clinical phase starts. If a resident must take a day off from clinical to recertify, they must use a personal/vacation day.

Extended Absences

- **Maternity/Paternity Leave**

The resident shall be granted paternity/maternity leave. If possible, submit written notification to the Program Director as early as possible but at a minimum eight weeks in advance of departure, with the anticipated plan for dates and length of the maternity/paternity leave. Missed clinical time above the clinical allotment, must be made up.

- **Military Leave**

The resident on active military service will be granted military leave under federal guidelines. It is recommended residents complete annual military service requirements prior to starting the program or during one of the breaks in the academic calendar (didactic phase). If the resident must attend military training or deployment, a copy of the military orders should be submitted to the Program Director before departure, if possible.