


<p>Name of Policy: Physician On-Call Schedule</p> <p>Policy Number: 3364-87-33</p> <p>Approving Body: Chief of Staff</p> <p>Responsible Agents: Chief Medical Officer</p> <p>Scope: UTMC Facilities</p>	 <p>Effective Date: 10/01/2023</p> <p>Initial Effective Date: 04/24/13</p>
<p>New policy proposal <input type="checkbox"/> Major revision of existing policy <input type="checkbox"/> <u>X</u> Minor/technical revision of existing policy</p> <p>Reaffirmation of existing policy <input type="checkbox"/></p>	

(A) Policy statement:

The maintenance and communication of an accurate on call schedule is vital to meeting the quality and safety needs of our patients, their families, practitioners and employees.

(B) Purpose of policy:

Medicare requires that a hospital maintain a list of physicians who are on call for duty after the initial examination to provide treatment necessary to stabilize an individual with an emergency medical condition. This policy therefore sets forth the procedure for maintaining a master on call schedule for the University of Toledo Medical Center ("UTMC").

(C) Scope

This policy applies to the UTMC Emergency Department and UTMC's inpatient facilities. The obligation to maintain a physician on-call only applies to those specialties that are within the "capabilities" of UTMC, as defined by EMTALA.

(D) Duty to Provide Call Services

I. Responsibilities of Medical Staff On-Call Physicians

- a) Responsibilities of an on-call physician for the assigned period includes: admission of patients for specialties with admitting services, timely consultations, and acceptance of appropriate referrals with no distinction of patient's financial status or insurance coverage. Physicians that provide only ambulatory services in UTMC ambulatory facilities must arrange for an admitting service for their patients.
- b) The Medicare statute imposes a potential penalty on a physician who is responsible for call and who fails to respond.
- c) Unless a shorter time is required by contract or agreement, physicians on call must be available within five (5) minutes by phone and be present at the hospital as follows:
 - Within **30 minutes** after notification that their services are needed at the hospital:
 - 1. Cardiothoracic: This requirement may be fulfilled by a cardiothoracic surgeon or a trauma/general surgeon with experience in cardiothoracic surgery for lifesaving procedures;

11. If a resident is fulfilling the trauma surgeon requirement, an attending trauma surgeon must be present at the hospital within 30 minutes after the decision to operate is made.

Within **60 minutes** after notification that their services are needed at the hospital: All other services.

(E) Procedure for Determining Call

1. Generally
 - a) Attending Physician call schedules and resident service call schedules for physicians that are required to provide call under this policy are under the oversight of the respective Clinical Service Chief. The Clinical Service Chief is responsible for maintaining current name, pager number or reliable cell phone number of each physician in the department who is required to fulfill on call duties.
 - b) On call schedules will be posted on the UTMC Intranet by the Department no later than the 20th day of the prior month.
2. On-Call Rosters Determined by Department Clinical Service Chief
 - a) Clinical Service Chiefs are responsible for providing the roster of on call attending physicians and on call residents back up physicians by the 15th day of the prior month. The roster and schedule will be posted on UTMC Intranet by the Clinical Department's Administrative Assistant, or designee.
 - b) Assignments are based upon the clinical privileges granted to the staff members and each clinical departmental criterion.
 - c) The actual name of the physician on call must be on the official call schedule.
 - d) The Clinical Service Chief is responsible for amending or updating the list for planned or unplanned absences for those on the list. The Clinical Service Chief will set the rules for providing sufficient notice of necessary changes.

<p>Approved by:</p> <p>_____ /s/ Puneet Sindhvani, MD, Chief of Staff</p> <p>_____ Date</p> <p>_____ /s/ Michael Ellis, MD Chief Medical Officer</p> <p>_____ Date</p> <p><i>Review/Revision Completed by: Medical Executive Committee</i></p>	<p>Policies Superseded by This Policy:</p> <p>Initial Effective Date: 04/24/13</p> <p>Review/Revision Date: 03/26/14 06/01/17 10/01/2020 10/01/2023</p> <p>Next Review Date: 10/01/2026</p>
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