I. **Background**

Medical training is designed to occur in a 36 month period of time. However, residents occasionally need to take an extended leave from training for pregnancy, illness or other reasons. The many policies and regulations that govern residency training create a complex environment in which to plan for these extended leaves. Three sets of considerations directly affect this process: ABIM requirements, hospital (employer) policy and our own departmental and program policies, which takes into consideration both hospital policy and the ABIM mandates.

II. **American Board of Internal Medicine Requirements**

To be eligible for the Certification Examination in Internal Medicine (“the Boards”), the American Board of Internal Medicine requires that physicians have completed 36 months of graduate medical training in an ACGME-accredited program by August 31 of that year (http://www.abim.org). The ABIM further stipulates that this 36-month period should contain:

1. At least 30 months of training in general internal medicine, subspecialty internal medicine, critical care medicine, geriatric medicine, and emergency medicine.
2. Up to three months of other electives approved by the internal medicine program director; and
3. Up to three months of leave for vacation time, parental leave, or illness. Vacation or other leave cannot be forfeited to reduce training time.

III. **Hospital (Employer) Policies**

*Parental Leave:* Employees of The New York-Presbyterian Hospital are entitled to six weeks of paid maternity leave for a vaginal delivery and eight weeks for a caesarean section. There is no paid paternity leave provided by the hospital. Eligible employees may also take advantage of Family Leave, in compliance with the federal Family and Medical Leave Act of 1993. This leave is unpaid and may affect employee benefits. Residents who are considering taking unpaid Family Leave should contact Human Resources at the earliest possible opportunity to discuss the financial and insurance implications of this Leave. **Although Family Leave is an option for eligible employees, this leave is NOT compliant with ABIM mandates and may result in ineligibility for the Certification Examination in the year of graduation.** Importantly, for those residents who do need to extend their training beyond 36 continuous months, New York-
Presbyterian Hospital has committed to paying a salary (including benefits) for the make-up time.

**Medical Leave:** All house staff are provided with up to 6 months of medical disability benefits. Although such a leave of absence would not permit residents to maintain Board Eligibility in the year of their previously anticipated graduation, it does allow employees who need to take a significant leave from work for medical reasons to maintain their health insurance and other benefits and to continue to receive a salary.

### IV. Departmental Policies

**Parental Leave:** Residents may use a combination of vacation and self-directed learning elective time to take parental leave and complete training within the 36 month period required for ABIM Board-eligibility. A self-directed learning elective, as stipulated in the Elective Policy, may be elected during a scheduled elective block, and allows residents to take parental leave and to maintain ABIM Board-eligibility. In brief, this elective, which must be approved by the program director or associate program directors at least one month in advance, should focus on the acquisition of knowledge through self-directed learning and focused reviews of the literature, addressing the core competency of Medical Knowledge. Residents should notify the Chief Residents and the Program Director as early as reasonably possible when they anticipate a parental leave.

**Other Medical Leave:** Residents are asked to contact the Chief Residents and Program Directors as soon as they believe they might need to take an extended leave of absence from training for medical reasons. Depending on the amount of time needed, it may be possible to maintain ABIM Board-Eligibility for the year of graduation by using self-directed learning elective time; the Chiefs will work to facilitate any scheduling changes to assist with this. The Chiefs and Program Director will also interface with the Graduate Medical Education Office to advocate for affected residents with respect to maintenance of benefits and salary.

**Non-Medical Leave:** Extended leave for other reasons, including personal reasons, education, family situations and so forth, may be undertaken by residents. Depending on the duration of such a leave, such a leave may entail formal withdrawal from the program. However, if the resident is in good standing, the Program would work to take the resident back within one to two years, provided that an open position exists. Residents should notify the Chief Residents and Program Director as far in advance as possible if an extended leave appears necessary or desirable.

### V. Practical Considerations

As pregnancy often follows a predictable course, the expectant resident should try to plan the timing of parental leave/self-directed learning elective and is expected
to arrange his/her schedule so that an elective block (and/or vacation) falls during the time when parental leave would be anticipated to begin. The Chief Residents should be contacted early during this process to facilitate any scheduling changes.

Residents on maternity leave will have no sick pull or clinic obligations during that time, in accordance with the mandates of their hospital-designated medical leave. Residents on paternity leave will have modified sick pull and clinical obligations. Specifically, they will be absolved of all sick pull and clinic duties for the first week of the leave. Following that first week, they will be responsible for minimal weekly continuity clinic sessions and for a fair share of sick pull responsibilities. Sick pull duties do not necessarily need to be fulfilled during the actual paternity leave; the Chief Residents are available to assist any interested residents to make suitable coverage arrangements.

Expectant residents are strongly encouraged to consider the childcare options available to them well in advance of delivery. Most commercially operated childcare centers have long wait-lists; many will not accept children less than eight weeks of age.

Navigating the different policies and regulations that affect parental and other extended leaves can be a challenging endeavor. It is imperative to involve the Chief Residents and Program Director at the earliest opportunity, so that we can advise and advocate for you most effectively.

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