GENERAL SURGERY SERVICES NIGHT CALLS FOR

Interns rotating on Red, Blue, Green, Gold and UH Vascular, and UH GS Night Float

There will be one intern rotating on the Red, Blue, Green, and Gold services and two interns rotating on UH Surg-Vasc. In addition, there is a Night Float intern (with some Anesthesiology interns on the service).

The Night Float intern will cross-cover Red, Blue, Green, Gold and UH Vasc on Sunday through Friday nights and have Saturday night off as their weekly day off. They return to work on Sunday night.

Interns from the other services will be called upon to take 24-hour call cross-cover during their rotation on Saturday. That intern will cross-cover both Saturday day and Saturday night, and be post-call on Sunday. Theses interns will also be asked to take a Sunday DAY cross-cover call and then sign out to the Night Float intern on Sunday night.

If you are Rounding on Saturday or Sunday, you will sign out to the intern cross-covering once you finish your rounds and leave.

There is a home call backup for each service at night, which is a Fellow, Chief or Junior on the services.

Robin Alton makes the intern schedule for each of these services. If you are requesting a certain weekend off (which may or may not be possible), please let her know well in advance.

Each of the services (except Night Float) has DEDICATED VIRTUAL PAGER as listed below:

RED   #17293
BLUE  #17292
GREEN #17291
GOLD  #17294
UH VASC #17257

When you initially come on the service, it is up to you to make sure the Intern Virtual Pager for your service has been signed out to you. Your chief or junior can show you how to sign out these pagers to yourself.

For sign-out, when changing shifts, the responsibility belongs to the intern signing out, but there have been instances when the incoming intern forwards the virtual pager to themself. This is usually in the morning when the night intern would have to reassign each team their virtual pager, so the responsibility is to each team intern to make sure their pager is reassigned at the correct time (smartweb defaults to 7am, but the night float leaves around 6am). On weekends, you may be signing out later to the cross-cover intern, depending on how long you are here rounding.

The whole idea behind the Virtual pagers is that you can list this pager number in EPIC for First Call instead of your pager number and since the Virtual pager is always signed out to somebody, the operators, nurses and HUCs can always get someone when they page.
1. During the day on weekends, each intern signing out is responsible for forwarding their pager.

2. Virtual pagers must be forwarded through the operator.

3. If you are on vacation or OFF, please make sure the Virtual pager is signed out during your time gone. Typically, the junior (or other intern on the service) will be covering you in your absence.

Please check to make sure the dedicated pager is signed out correctly when you go off service!

- The intern on at night will receive sign out from the other services’ interns at 7:00 pm on Sunday & Monday, and 6:00 pm Tuesday, Wednesday, Thursday, and Friday.

- The intern on at night responsible for answering pages on WARD inpatients from WARD nurses only. They will not care for ICU patients, trauma patients, or Emergency General Surgery (EGS) patients. ICU patients are covered by R-2 or above, per the schedule. R-2 and above residents take outpatient calls for these services and are also available for you to call about significant changes in the condition of their patients. (They are on “home call” and can be reached through the operator.)

- You are allowed to do the following without direct supervision (someone present WITH you):

  Patient Management Competencies
  
  1. Evaluation and management of a patient admitted to hospital, including initial history and physical examination, formulation of a plan of therapy, and necessary orders for therapy and tests.
  2. Pre-operative evaluation and management, including history and physical examination, formulation of a plan of therapy, and specification of necessary tests.
  3. Evaluation and management of post-operative patients, including the conduct of monitoring, and orders for medications, testing, and other treatments.
  4. Transfer of patients between hospital units or hospitals.
  5. Discharge of patients from the hospital.
  6. Interpretation of laboratory results.

  Procedural Competencies
  
  1. Performance of basic venous access procedures, including establishing intravenous access.
  3. Arterial puncture for blood gases.
• For the following problems, you should call the EGS resident (pager 11029) to see the patient with you and agree with your assessment and management until you have passed all aspects of the patient management competency:

  - Hypotension
  - Hypertension
  - Oliguria
  - Anuria
  - Cardiac arrhythmia
  - Hypoxemia
  - Changes in respiratory rate
  - Change in neurologic status
  - Compartment syndrome

• You should update the R, B, Gr, G, and V patient lists (found on the x drive) to reflect changes that occur during the night (additions or subtractions, transfers, re-admits, significant events) and report these to the day intern during sign-out. Your assessment and management of significant overnight events should also be documented in a Progress Note or Significant Event Note.

• The intern on Night Float will meet twice a week on Tuesday and Thursday with an assigned faculty member from 6:30-7:00am after they have signed out to the day interns to go over events of the night before. Then, they are ready to leave. The intern on Night Float will receive an email telling them where to meet the faculty member and who they are meeting.
EGS, TRAUMA AND ICU INTERN CALL

Interns on this call schedule cover EGS, Trauma and TX at night.

Interns are responsible for covering the inpatient trauma floor patients, EGS floor patients, and the Transplant floor patients. Following up on anything from sign out (ie. post op checks, labs, imaging, etc.) and anything that comes up overnight. Also, responsible for helping with incoming traumas (levels 1 and 2) by scribing for them. It is a relatively busy night service, but there is always an upper level EGS resident in house to ask questions or to help out.

The intern is also responsible for admitting any direct admits to the ward for EGS and talking to the EGS junior/chief after they see them.

And, interns are responsible for preop transplant admits – possible receptors – need full H&P, orders and make sure they are ok to go to the OR if the organ is adequate.