Policy Guidelines During Parenting Leave for Residents in the Department of Obstetrics and Gynecology

The purpose of this is to set forth guidelines that will be utilized in scheduling call duties and assigning vacation time for those residents taking parenting leave. The University of Alabama Hospital House Staff Policies and Procedures manual clearly defines the institutional policy toward maternity and paternity leave.

1. To summarize the house staff policies and procedures position on maternity leave: Section I paragraphs 14.4 and 14.6: “Vacation: the working year is defined in terms of 52 weeks of which 3 weeks are allowed for vacation purposes...Salary continuation by University Hospital during maternity leave is comprised of the allowable 3 weeks of illness leave plus allowable 3 weeks vacation. The available maximum 6 weeks paid maternity leave time is reduced by any amount of sick leave or vacation time already expended during the year. Residents requiring in excess of 6 weeks maternity leave should be placed on leave of absence without pay, and the appropriate personnel forms sent to the house staff office.”

2. The American Board of Obstetrics and Gynecology states the following requirements in order to be eligible to enter the certification process: Leaves of absence and vacation may be granted to residents at the discretion of the program director in accordance with local policy. However, the total of such vacation and leaves for any reason—including, but not limited to, vacation, sick leave, maternity or paternity leave, job interviews or personal leave—may not exceed 8 weeks in any of the first three years of residency training, or 6 weeks during the fourth year of residency. If any of these maximum per year weeks of leave are exceeded, the residency must be extended for the duration of time the individual was absent in excess of either 8 weeks in years one, two or three, or 6 weeks in the fourth year. In addition to the yearly leave limits above, a resident must not take more than a total 20 weeks of leave over the four years of residency training. If this limit is exceeded, the residency must be extended for the duration of time that the individual was absent in excess of 20 weeks.

3. Residents should notify the Administrative Chief Resident of their pregnancy or their spouse’s pregnancy by the end of the first trimester so that plans for call duties, leave time, and service coverage can be arranged as necessary.

4. Recognizing that each case is unique and will be handled on an individual basis, a maternity leave of 4 weeks duration will be suggested as a starting point. This will allow the resident to take 3 weeks of sick leave and 1 week of vacation for their maternity leave. The resident will then be able to take one week of vacation at the Holidays and one other week of vacation for that year.

5. Leave greater than 4 weeks requires completion of Family Medical Leave Act (FMLA) forms (See links below). Prior to leave, the FMLA Request Form and the Certification of Employee Health Condition Form should be submitted. The Request Form should be submitted to Ob/Gyn administration via the residency program coordinator. The Certification of Employee Health Condition Form should be submitted directly to Employee Health via instructions on the form. Before returning to work, the resident must also submit the Request to Return Form to the residency program coordinator. Residents must return to work on the date listed on the form to ensure continuity of pay. Failure to submit the form prior to returning to work will result in negative action that could include loss of pay, delayed return or overpayment for returning to work after the date scheduled and could prolong or extend length of residency. Leave greater than 5 weeks limits the amount of remaining sick leave that an individual has for the year.
6. Paternity leave is recommended to be no longer than two weeks. The first week is sick leave; the resident may then opt to take a second week as vacation. Like maternity leave, the length of anticipated leave should be worked out early in pregnancy to minimize coverage difficulties.

7. Our department’s standard vacation guidelines may be modified as needed for individuals taking parenting leave. Although there is traditionally a vacation one week at either Christmas or New Year’s, a resident anticipating parenting leave may work during both holidays and save that week for use at a later time. Should a resident choose to work through these holidays, s/he will be assigned a fair and equitable schedule, including either Christmas or New Year’s day off in observance of University holidays. Call will not be excessive, usually with the resident on call only during one of the two weeks.

8. Fellow residents will be compensated for the extra call they take while the resident is away on parenting leave. For example, individual planning for maternity leave will be asked to take approximately one extra call night each month as they work toward their due date. The pregnant resident or expectant father resident will be expected to take extra call that equals the call they would have taken during their anticipated leave. Furthermore, in any given academic year, the amount of call taken by a resident should be similar to the amount of call taken by other residents at the same level, regardless of the amount of sick leave, parenting leave, and/or vacation taken by any resident. Compliance with duty hour requirements must be maintained at all times.

9. It is recognized that a resident may experience complications during pregnancy requiring them to miss more than 6 weeks out of a given year. The Residency Program Director and Administrative Chief Residents will handle these cases on an individual basis.

Each pregnancy during residency should be handled in a unique, individualized, and positive manner. The above guidelines will hopefully reduce the stress and hardship that can naturally be associated with pregnancy during an OB/GYN residency. These guidelines provide a framework for scheduling call duties and vacation time. They are to be used as an adjunct to the well-established medical leave/maternity leave policy set forth by the University of Alabama House Staff.