Graduate Medical Education Leave of Absence
Policy and Procedure

April 27, 2015

Purpose: To provide guidance to all residents and fellows regarding their employer’s policy on Leaves of Absence, the effect that any leave may have on the completion of the training program, and the impact of the leave on the trainee’s eligibility for board certification.

Scope: This policy and procedure applies to all residents and fellows in ACGME accredited programs sponsored by UMKC School of Medicine.

Leave of Absence with Pay:

1. Definition. Leave of absence with pay is the use of accumulated vacation or sick time.
   a. UMKC employees: The resident or fellow has 21 working days per year of vacation time. Vacation time does not roll over from year to year. Sick leave is accumulated at a rate of one day per month (or 12 days per year) and does roll over from year to year to a maximum of 72 days.
   b. Non UMKC employees must comply with the policy and procedures of their employer.

2. Procedure. Vacation and sick time is managed at the residency level. The program director is responsible for approving leave with pay (or oversight of the policy regarding leave with pay). The residency and fellowship coordinators are responsible for administering the policy.

Leave of Absence without Pay:

1. Definition. Leave of absence without pay is any leave from work that does not meet the criteria of leave with pay.
   a. Family Medical Leave. Residents and fellows who have been employees of UMKC, Children’s Mercy Hospital or the Department of Mental Health for at least 12 months are covered by the Family Medical Leave Act (FMLA). FMLA covers leave for a personal serious health condition; a serious health condition of the employee’s parent, spouse or child; and the birth, adoption or foster care placement of a child with the employee. FMLA provides up to 12 weeks of leave for any 12 month period.
   b. Leave of Absence. A leave of absence that does not fulfill the criteria for leave with pay of FMLA can also be requested and will be considered as a Leave of Absence without Pay. Leaves without pay may be granted for a maximum of one year, not to extend beyond the duration of the employee’s current contract.

2. Procedure. Leaves of absence without pay are requested through the program director. Accompanying the request to the program director should be an estimate of the timing and duration of the leave. Whenever possible, at least 30 days advance notice should be given. To receive a leave of absence without pay, the employee
must have used all appropriate accumulated leave with pay (vacation and sick leave). Leaves meeting the criteria for FMLA will be approved by the program director. Leaves of absence not meeting the criteria of FMLA will be considered by the program director and be approved when the obligations of the department can be met without undue hardship during the employee’s absence. Once approved, the requests for leave without pay will be sent to the GME office of the employer for administrative processing.

Impact of Leaves of Absence on Completion of the Training Program and Eligibility for Board Certification:

1. **Completion of the Training Program.** Each residency or fellowship training program will have specific criteria for satisfactorily completing the entire program as well as each level (year) of training. These criteria will, at a minimum, meet the criteria necessary for certification by the appropriate medical specialty board. The criteria may be more rigorous than the criteria set by the specialty board, at the discretion of the program faculty. These criteria will be clearly outlined in the program’s policy and/or evaluation manual and will be readily available to all housestaff in the program. The University will issue certificates of training completion at the direction of the Program Director when a resident or fellow has met the program criteria.

2. **Eligibility for Board Certification.** Standards for eligibility for specialty board certification are developed by the individual specialty board (as recognized by the American Board of Medical Specialties). These policies are recognized and followed, without exception, by all UMKC School of Medicine sponsored graduate medical education programs. Details of each policy can be found on the websites of each individual specialty board ([www.abms.org](http://www.abms.org)). Current policies for selected specialty boards:

   a. Allergy and Immunology: Absences (including vacation and sick leave) in excess of two months over the 24 months of the training program should be made up. Exceptions may be considered, if supported by the program director.

   b. Anesthesiology: The total of any and all absences (including vacation and sick leave) may not exceed 12 weeks (60 working days) during the three years of clinical anesthesia training.

   c. Emergency Medicine: Leaves of absence (including vacation and sick time) that exceed six weeks in an academic year require extension of the residency program.

   d. Family Medicine: Absence from the program for vacation, illness or other leave must not exceed a combined total of one month per academic year. Any time beyond this must be made up. Continuous leaves of absence in excess of three months are considered a violation of the continuity of care requirements and may result in extension of training beyond the traditional 36 months.

   e. Internal Medicine and subspecialties: Trainees may take up to one month per year of training for vacation, parental or family leave or illness. Training must be extended to make up any absences exceeding one month per year.

   f. Obstetrics and Gynecology: If the total of leaves of absence and vacation exceeds eight weeks in any of the first three years of
training or six weeks in the fourth year of training, or twenty weeks over the entire four years of training, the training program must be extended to meet the minimum of these requirements.

g. Orthopedic Surgery: One year of credit must include at least 46 weeks of full-time orthopedic education. Any leave (including vacation, sick time) beyond this must be made up.

h. Ophthalmology: Training programs may schedule individual leave or vacation time for residents in accordance with the overall institutional policy.

i. Pathology and Pediatric Pathology: The resident must document an average of 48 weeks per year of full-time pathology training over the course of the training program. Any additional leave must be made up.

j. Pediatrics and subspecialties: One month of absence is allowed each year for leave (vacation, sick, parental leave). Absences beyond this should be made up by additional time of training. The program director may petition the American Board of Pediatrics for exceptions to this policy.

k. Psychiatry: Total leave and vacation time may not exceed six calendar weeks per year. Any leave (including vacation, sick time) beyond this must be made up.

l. Radiology and Pediatric Radiology: Total leave and vacation time may not exceed six calendar weeks per year. If a longer leave of absence is granted, the required period of training must be extended accordingly.

m. Surgery: Residents must have no fewer than 48 weeks of full-time surgical experience in each year of training. For documented medical problems or maternity leave, the board will accept 46 weeks of training in one of the first three years and in one of the last two years.

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