

Call Responsibilities:

Weeknight call is taken from home. Call on weekend days is taken in the hospital while care of acute patients is being delivered (rounding, writing orders, etc.), after which the fellow may return home for home-based call.

Frequency:

Call is rotated among fellows, faculty, and the resident on the Geriatric Medicine rotation. Call obligations will be well below that which would violate RRC guidelines for work hours.

Responsibilities:

Weeknight calls generally arise from nursing home patients. (The majority of calls from community-dwelling patients are handled by a nurse, who will rarely page for advice.)

Weekend calls arise from nursing home patients as above, plus pages from the Emergency Department (during our daytime admitting hours) for patients who have been determined by E.D. staff to need admission to the Geriatric Medicine service.

If the fellow receives a page that presents a challenging situation, he/she is encouraged to contact the backup attending on call to discuss the situation.

Inpatient Service Responsibilities:

When the resident on the Geriatric Medicine rotation is absent (vacation, illness, clinic), the acute care fellow (if one is scheduled on this rotation) will generally assume care of the inpatient service with the attending geriatrician.