

# DEPARTMENT OF ANESTHESIOLOGY

VANDERBILT  UNIVERSITY  
MEDICAL CENTER

**Standard Operating Procedure Title:** Pediatric Anesthesiology Call Resident/SRNA Policy

**Policy Number:** C 280

**Date Established:** 9/13/02

**Date Reviewed:** 4/26/16

**Date Revised:** 3/7/06

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1. The pediatric anesthesia call resident/SRNA is to report to the MCE operating room at 6:00a.m. Monday through Friday, and begin beeper call at 7:00 a.m. Saturday, Sunday, and VUMC sanctioned holidays.
2. On all call days (except all Saturdays and Sundays before a Monday holiday), if the on-call pediatric resident/SRNA is relieved from the OR before 8:00 p.m. and does not return later in the evening or early morning to provide anesthesia, he or she should return to the MCE OR at 6:00a.m. This resident/SRNA will be assigned to a room consistent with their abilities and training level.
3. If the on-call pediatric resident/SRNA provides anesthesia in the OR past 8:00 p.m., but leaves before 1:00 a.m., they are to return to the MCE OR 10 hours later. The resident/SRNA will indicate return time on the clock posted by the control room door. When the resident/SRNA returns the next day he/she will be assigned to a specific OR room or assigned to give lunch breaks. The assignment of the after call resident/SRNA will depend on the status of the surgical cases in progress, the educational needs of the resident/SRNA, and be at the discretion of the AIC.
4. If the on-call pediatric resident/SRNA provides anesthesia in the OR past 1:00 a.m., they will have the next day off. The resident/SRNA should indicate this by putting up the yellow sign indicating “After Call Resident/SRNA Will Not Be In Today” by the control room door.
5. In the event of cases likely to run past 8:00 p.m. in the MCE OR, it is desirable to relieve the pediatric call person, if possible, in order to prevent their absence the next day. In such cases the pediatric on call anesthesiologist should contact the main OR attending on/by 9:00 p.m. to discuss the availability of providers. The pediatric anesthesiology call person will remain on pager call for possible redeployment.
6. If the pediatric on-call resident/SRNA is in-house past 1:00 a.m., the following policy applies:
  - a. At 6:30 a.m., the pediatric AIC will contact the Main OR AIC to inquire about the availability of a pediatric capable anesthesia provider to replace the on-call person who is excused for the day.
  - b. If available, that individual will be assigned to MCE to provide breaks and lunches as usual.
  - c. If not available, the pediatric anesthesia attendings will do their best to give breaks. On such days, the MCE AIC and MOR AIC will work closely together to arrange for assistance should resources become available during the day. If necessary, the MCE AIC may purchase lunches using incentive funds or make schedule changes in order to facilitate the break

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process.

7. The frequency of late cases/absence of post call providers and the success of the redeployment plan will be tracked by the Division of Pediatric Anesthesiology and reported to the Department of Anesthesiology Clinical Affairs Committee.