

Policy Name: 8.08.1 Medical Student Workload and Duty-Hour Policy

LCME Requirement 8.8:

The faculty of a medical school ensure that the medical curriculum includes self-directed learning experiences and unscheduled time to allow medical students to develop the skills of lifelong learning. Self-directed learning involves medical students' self-assessment of learning needs; independent identification, analysis, and synthesis of relevant information; appraisal of the credibility of information sources; and feedback on these skills.

Scope

Medical student workloads must support students' learning while preserving an appropriate level of engagement with the academic and clinical learning environment. The specific details of these expectations will vary somewhat depending on the phase of the educational program, clinical specialty or rotation, but must take into account the impact of fatigue on student learning and patient safety, reinforce that duty-hours limits, like other compliance requirements for physicians, are consistent with meeting professional standards and ensure balance between educational priorities, service needs of the clinical setting and the students' personal wellness. Student duty-hour restrictions during clinical clerkships and courses are modeled after the American Council on Graduate Medical Education (ACGME) guidelines for residents.

Policy

Course and Clerkship Experience Directors are expected to plan and manage courses, including all scheduled activities and expected independent work, within the academic workload and duty-hour parameters approved by the School of Medicines Curriculum Oversight Committee (COC). It is the responsibility, as a part of professionalism, for the student to abide by medical school requirements regarding duty-hour restrictions. Violations of the Workload and Duty-Hour Policy should be reported to the Associate Dean for UME.

Phase 1 Curriculum:

The scientific foundation courses are organized into modular blocks of varying lengths, using multiple teaching and learning formats. The phase 1 curriculum includes block and longitudinal courses that have scheduled activities as well as learning events.

Workload Limits

- Maximum of 20 hours of required scheduled activities per week
- Estimated 1.5 to 2 hours of assigned preparation materials per each hour of required scheduled activities averaged over the course of a week.

For all required content (lecture, case discussions, small group discussions and exams), a scheduled hour is logged as a formal instruction hour.

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The total workload for an average student in the Phase 1 preclinical years must be kept to a maximum of 80 hours per week. This should provide time for the student's personal wellness and social engagement.

Phase 2 and Phase 3 Clinical Experiences and Clinical Selectives:

Clinical clerkships and rotations vary in length. Students are assigned to various clinical sites and work under the supervision of designated SOM faculty and residents. During clinical clerkships and courses, students are expected to participate in all required clinical and didactic activities. Examples of such activities include direct patient care, clinical teaching rounds, patient documentation, case conferences and interactive lectures. Students are expected to assume increasing levels of accountability and thus responsibility for healthcare delivery, as appropriate under the supervision of faculty and residents. The amount of time needed for a student to adequately meet his or her responsibilities varies depending on rotation and may include overnight call.

Duty-hour expectations include all required activities in the clinical years; therefore, if a student has clerkship duties and additional expectation from a longitudinal course, the hours are added cumulatively and in total must remain within the duty-hour limits.

Phase 2 and Phase 3 students are expected to abide by the following duty-hour limits (modeled after the ACGME guidelines for residents):

- Must be limited to 80 duty hours per week.
- Must be scheduled for in-house call no more frequently than every third night, when averaged over a four-week period.
- Must be limited to a maximum of 24 hours of continuous duty in the clinical setting and up to four hours of additional time may be used for activities strictly related to patient safety, such as providing effective transitions of care, and/or education
- Must not be assigned additional clinical responsibilities following 24 hours of continuous in-house clinical duty.
- Should have 10 hours free of clinical duty between shifts. They must have at least 14 hours free of clinical duty after 24 hours of in-house clinical duty.

Students should report duty-hour violations to the specialty specific Clinical Experience Director or Coordinator or the Associate Dean for UME.

The Office of Medical Education will continuously monitor violations to the Workload and Duty-Hour Policy and will notify the clerkship director and departmental leadership, and the Phase 2 and Phase 3 Subcommittee of any violations. Workloads in all phases of the curriculum will be tracked by the CQI committee as well.

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