



Sample Resident/Fellow Schedule!

The focus of this schedule is that residents have enough time for rounding, have some built-in breaks, stay within duty hours, are involved during camp, and have a direction of their role during each section of the day.

7:15 All clinic staff meets for AM meeting in Clinic. The meeting led by Kate

Breakfast - all clinic staff present to help with insulin for breakfast

AM 1

AM 2

Lunch - All clinic staff present to help with insulin

PM 1

PM 2

All Camp Swim - residents & fellows & attending Rounding, all other clinic staff at Camp Swim.

Dinner - all clinic staff present to help with insulin

Evening activity – each day 1/2 the resident/fellows will be on a "short day" where they are on break immediately after insulin is dosed for dinner.

The other 1/2 will join for evening snack and can optionally choose to join for Cookie Raid.

Bedtime Snack - baseline clinic staff + 1/2 of residents

Late Night Activity (Cookie Raid) - only 1-2 cabins per night. optional resident involvement.

Night Shift - no resident involvement.

For the 4 AM/PM activity blocks -

1 of these will be a break. Time can be used for personal pursuits or to participate in an activity such as paddle board on the lake!

2 of these they will be given a set role: Clinic, Lake, Archery. Resident preferences can possibly be taken into account on zone (i.e., if someone prefers the Lake). Also, depending on the staff for that week, residents may disproportionately take the role in the clinic as this is the main location patients with significant highs, lows, or non-diabetes related issues converge! They will typically not be the only clinic staff member at a location.

PM2 - all residents assigned to the Clinic to start rounding. They may also cover small incidents that come to the clinic (i.e. low glucose). Anything more time consuming but still a minor concern, they will defer to other clinic staff or radio for another staff member to take over if appropriate. Of note, during all camp swim, they will have no other role and can be 100% focused on rounding. Someone else should be assigned to the clinic for that time. However, any emergencies will take precedence over rounding at any time.

Resident/Fellow schedules will alternate between A days (long) and B days (Short)

Alternating Schedule A and Schedule B

- Schedule A: 7:15 am – 9 pm (~14) (max 3 days per week)
- Schedule B: 7:15 am-6:30 pm (11.25h)
- 9 hours on Sunday (12-9 pm)
- 6 hours on Saturday (7 – 1 pm)
- 1-hour break each day during one of AM 1/AM2/PM1/PM2

Residents at Camp / Residents Not Staying at Camp

- We encourage residents to stay at camp!
- schedule is the same either way
- They can leave after bedtime snack on A days, after dinner insulin on their B days
- optional participation in Cookie Raid late-night activity.

This results in 79.25 hours which includes the 5 hours of break time throughout the week. (So, 74.25 hours without those)

This is my most conservative estimate as it assumes 3 scheduled A days and someone fully present for Sunday & Saturday. Realistically, residents could leave earlier on Saturday (i.e., not stay for lunch and debrief session). Also, we could have 1/2 the residents leave after dinner on Sunday, which would also cut down by about 3 hours