RESIDENT PARENTAL AND FAMILY LEAVE POLICY

PURPOSE
To clarify the parental and family leave policy specific to the General Surgery Residency Program.

PERSONS INVOLVED
Any Categorical General Surgery Resident

PROCEDURES
Northwestern General Surgery Program will work with each trainee to determine what is appropriate and best for the resident. We encourage trainees to read both McGaw and ABS policies, summarized here:

McGaw Policy
Trainees may take up to six weeks of paid leave for the purpose of childrearing after the birth of their child or the placement of their child following an adoption or foster care arrangement. Leaves for childrearing shall be applied equally to trainees, regardless of gender or gender identity.

If a trainee has a subsequent child while enrolled in the Program or their Medical, Caretaker, and Parental leave has already been exhausted, trainees may take two weeks of paid leave for the purposes outlined in this Parental Leave provision. This additional leave is available once per training year.

ABS Family Leave Policy

General Requirements
In general, the ABS requires 48 weeks of full-time clinical activity in each of the five years of residency, regardless of the amount of operative experience obtained. The remaining four weeks of the year are considered non-clinical time that may be used for any purpose, such as vacation, conferences, interviews, etc.

All time away from clinical activity (i.e., non-clinical time), including vacation and time taken for interviews, visa issues, etc., must be accounted for on the application for certification.

ABS General Surgery Family Leave Policy

The ABS acknowledges the need to take time away from training for certain significant life events. Effective as of the 2021-2022 academic year and thereafter, as allowed by their programs, residents may take documented leave to care for a new child, whether for the birth, the adoption, or placement of a child in foster care; to care for a seriously ill family member (partner, child, or parent); to grieve the loss of a family member (partner, child, or parent); or to recover from the resident's own serious illness. This policy is not retroactive and does not apply to leave taken prior to the 2021-2022 academic year.

Residents may take an additional four (4) weeks off during the first three (3) years of residency, for a total of 140 weeks required, and an additional four (4) weeks off during the last two (2) years of residency, for a total of 92
weeks required, all while maintaining admissibility to the ABS initial certification examination process. Residents are expected to complete a minimum of 48 weeks of Chief Resident rotations (e.g., a resident may accomplish this by logging chief cases as a PGY-4).

Note: This is an ABS policy only and should not be confused with family leave as permitted by the Family and Medical Leave Act (FMLA). No approval is needed for this option if taken as outlined.

Additional Leave Options

While the ABS considers the 48-week requirement to be a valuable standard in developing fully-trained surgeons, options are available to provide programs and residents with some flexibility.

Averaging

The 48 weeks may be averaged over the first 3 years of residency, for a total of 144 weeks required in the first 3 years, and over the last 2 years, for a total of 96 weeks required in the last 2 years. Thus, non-clinical time may be reduced in one year to allow for additional non-clinical time in another year.

Extending Chief Year

The ABS will permit, with advance approval, applicants to extend their final year of training through the end of August and still take that year's Qualifying Exam (QE). Upon completion of training, a letter of attestation will be required from the program director stating that the individual has met ABS requirements. The attestation letter must be received by the ABS before registration for a Certifying Exam date is permitted. In addition, prior approval from the RC-Surgery may be needed for the increase in complement.

ABS Leave Policy