GUIDELINES FOR CALLING WARD ATTENDINGS

Rule #1: When in Doubt: call!
Rule #2: Anyone can call the attending (Senior resident, Intern, Nurse)

- Minimum one call per night for staffing. Senior resident must call the attending at least once to run thru the list and provide updates. This can be done around 10pm or sooner if there are any questions.

- All IMC or otherwise monitored patients must be discussed with the attending within 4 hours of arrival to the floor/unit.

- Change of patient status (*beware the 5am to 8am limbo period*). Senior resident must call the attending to notify them of any changes in the clinical status, particularly if it is unexpected. This may include but is not limited to increased work of breathing requiring more frequent nebulizer treatments, hypotension requiring extra fluid boluses, altered mental status, need for Rapid Response, or consideration for transfer to PICU.

- Critical lab results or decision-making (i.e. positive blood cultures in H/O patient). Senior resident must call the attending when elaborate decision-making is needed, i.e. choosing antibiotics to cover new culture results or empiric coverage based on change in clinical status., abnormal lab results requiring further action.

Updated 7/20/11