DEPARTMENT OF NEUROSURGERY  
UNIVERSITY OF UTAH  
VACATION, CONFERENCES AND LEAVE POLICY  
(Revised 5-9-2016)

The service will try to be flexible to try to accommodate individual's vacation requests as long as it does not interfere with the proper functioning of the service. The following general rules should be adhered to:

1) All vacation and travel request forms need to be approved by the Program Director. This applies to any and all time away from the service. This includes going to meetings that are funded by sources other than the Department. Vacation/conference leave requests should be submitted well prior to the date of departure. The last date that they will be accepted is one month prior to the date of the meeting, but earlier notification would be best.

2) There will be no vacation the last two weeks of June and the first two weeks of July. In addition, residents should not plan vacation during times of meetings, since that will reduce the ability of other residents to attend these meetings. Specifically, no vacation should be planned during the time of the Lende Winter Neurosurgery Conference which is held the first week of February each year. In addition, other meetings that should be respected are the Rocky Mountain Neurosurgical Society, the American Association of Neurological Surgeons, and the Congress of Neurological Surgeons annual meetings.

3) Only one resident may be gone from a service at a time. We traditionally try to provide additional time off during the Christmas/New Years holiday season. To provide for adequate service coverage vacations should not generally be planned at this time.

4) Residents involved in the National Guard or any other organized reserve branch of the United States Armed Services are entitled to leave of absence not exceeding 15 calendar days or 11 working days per year. This is leave time and is in addition to annual paid vacation.

5) The usual vacation will be seven days. The maximum consecutive vacation time that can be taken is two weeks but if this is done it should be organized to minimize the impact on the service. For example PGY-2 residents should overlap months.

6) In case of conflicting requests, vacations will be awarded by seniority; however seniority preference only exists at the time of the initial request. A senior resident may not change his vacation time to a time already scheduled by a junior resident.

7) At the program director’s discretion, and with the resident’s permission, it is permissible to grant a resident only two weeks of vacation in one year, and make it up by granting four weeks the next year.

8) If scheduling does not permit a resident to take three weeks of vacation per year for each year of training, the resident will be paid for the missed vacation at the end of their training program out of departmental funds.

A. Meeting Policies

Residents are encouraged to submit papers for presentation at both regional and national neurosurgical meetings. A submitted presentation should be coordinated with one of the faculty staff and a copy of any abstract submitted should be forwarded to the program director. If a resident has a talk accepted for the meeting, the travel request should be sent to the program director as soon as they have been informed that their work has been accepted. The same applies to talking at courses. Requests will be considered in light of the number of people who want to travel, the relevance of the meeting, the academic work that the resident is doing at the meeting and the cost. “Academic work” will be considered in the following hierarchy: Residents receiving awards will
have priority over residents giving platform presentations, who will have priority over oral posters, who will have priority over regular posters. Residents (including Chiefs) will not necessarily be reimbursed for attendance at meetings where they are not presenting academic work. If additional time is taken, either before or after the meeting, it will be at the individual resident’s expense and taken as vacation time. It is anticipated that any resident attending a meeting at departmental expense will participate fully in the meeting. Submission of abstracts to meetings outside the Continental United States can only be done with prior approval of the program director and will usually only be considered under exceptional circumstances. Each resident will have a maximum of five weeks off per academic year. Three weeks of vacation and a maximum of two weeks time off for attendance at meetings, etc.

B. Leave Policy

The Neurosurgery Residency Review Committee has no specific policy regarding leave of any kind. Heretofore, leave has been determined by the department chairman. The Family Medical Leave Act (FMLA) mandates that employees be granted leave from work for various personal and medical reasons. Resident staff at the University of Utah are contractually guaranteed 21 days of vacation per year of training. An additional 4 weeks of leave, for whatever reason, will be allowed during a given year for a total of 7 weeks of missed training time in a 12-month period (14%). During a period of leave the resident will continue to receive pay and benefits, including insurance, at the rate specified by hospital policy.

Because of the intense nature of neurosurgical training and the major responsibilities every resident has to the patients and the service, use of leave time must be restricted to significant personal or family needs and for the minimum amount of time needed for these events.

Residents will be readmitted to the program at the end of the family leave at the same status as when leave commenced. Any resident who takes an extended leave must meet with the program director about his or her return to determine if they will have to make up time to make up the minimum requirements required by the program and the American Board of Neurological Surgery. Abuse of leave time may serve as grounds for probation or termination.

1) Definition

Leave is defined as time spent away from clinical or research responsibility on the neurosurgery service during the duration of the residency training program (7 years). Activities such as educational symposiums or professional meetings related to neurosurgical education are not considered leave if they are approved by the program director. Vacation is independent of leave. Leave cannot be accumulated from year to year.

2) Types of Leave

Leave will be classified as one of the following: maternity, paternity, adoption, major illness, military service, personal or family need, or bereavement.

a) Maternity: The Department of Neurosurgery feels that maternity leave is important for full recovery of the resident and to assure her ability to work a complete schedule upon her return. Maternity leave of 4 weeks paid leave and vacation time may be taken in conjunction. Per the FMLA, additional unpaid leave is available, and residents should discuss this matter with the Program Director. Maternity leave may
have to be made up from elective time or at the end of the residency to meet the requirements of the American Board of Neurological Surgery. No scheduling concessions, i.e., "light duty" can be accommodated. The resident is responsible for arranging for coverage of her normal call assignments during maternity leave. It is strongly suggested that individual arrangements be made during the prenatal period to make up this time.

b) Paternity: A resident is allowed to attend the birth of his children and an additional 2 days paid leave. Vacation time may be taken in conjunction with paternity leave. Per the FMLA, additional unpaid leave is available, and residents should discuss this matter with the Program Director.

c) Adoption: A resident, either male or female, is entitled to 2 days paid leave for the purpose of adoption. Vacation time may be taken in conjunction with adoption leave. Per the FMLA, additional unpaid leave is available, and residents should discuss this matter with the Program Director.

d) Major Illness: Since residents are considered "temporary" employees by the University Hospital, they do not accrue sick leave. Leave will be granted for the duration of a major medical or psychological illness at the discretion of the program director. The resident may be required to make up the missed training time at the end of the training period without pay. Sick pay and insurance benefits will continue for the duration specified by hospital policy.

e) Military Service: A resident involved in the National Guard or other organized reserve branches of the U.S. Armed Forces are entitled to 15 work days of leave per year. This is paid leave and is in addition to vacation time.

f) Personal or Family Need: A resident may be granted a 1-week period of leave with the prior approval of the program director. An example of acceptable reasons for approval might include a family member with a major illness.

g) Bereavement: A resident may take up to three working days, to extent Program Director deems reasonable and necessary. This leave is available in the event of death of a parent, spouse, child, sibling, parent-in-law, brother-in-law, sister-in-law, grandparent or grandchild.

h) Unusual Circumstances: Under "unusual" circumstances, a resident may be granted leave for an unspecified amount of time with the prior approval of the program director. This leave may or may not be paid and make up time may be required.

As specified above, a resident may receive up to 7 weeks of paid leave per year, including vacation, without penalty, with additional unpaid time if circumstances dictate. Individuals with prolonged absences or with repetitive annual absences may require additional make up time at the end of the residency to meet the requirements of board eligibility or if, in the judgment of the program director, it is needed for the individual to be fully trained. Such additional make up time at the end of the residency will be without pay.