

Weekend Responsibilities as a Senior Resident at Sunnybrook

1. **Overnight SMR** ☞ see [SMR Call Guide](#)

2. **ER Senior**

Responsibilities

You will be first on-call from 9am to 4:30 pm for the following:

- 1) Consults from the ED
- 2) ICU transfers
- 3) Medical Consults (you are not rounding on patients followed by Med Consults)

Work flow

You are not expected to do every consult you receive by yourself. We have an entire call team in house, and are working together.

In the morning, you should check in with the outgoing overnight SMR to hear about handover consults. As you would overnight, see patients in order of priority from most to least sick.

If patients in the ED or ICU are appropriate for GIM admission/transfer, admit as you would when on call overnight (admit to Silver if appropriate/they have beds, to Orange if they have beds/patient doesn't require telemetry, and to other colour teams starting with lowest census). Once you complete the consult, review with the GIM staff for the admitting team, add the patient to the admitting team's list, and hand over to the person covering that team (silver – staff, orange – hospitalist fellow, colour teams – resident). As you would overnight, you must also review any patients you'd like to discharge with staff (for discharges you will review with the on-call Staff). Med Consults should be reviewed with the Med Consults staff (note this is a different person than the GIM staff on-call and different from the Silver Staff. Find the Med Consults staff on paging by searching "Ward Med Consult").

Once into the early afternoon (or earlier as below if things are very busy) – you can use your judgment, but we recommend by 2 pm – your responsibility changes from doing the full consult yourself to instead triaging, writing basic admission orders, and then assigning the consult to the team to which you've admitted the patient. By this time, the juniors should be done/nearly done rounding. It is okay if they're not available to come down immediately, as you've already providing initial assessment and admitted them. Depending on when they see the consult, the junior may review with the ER senior (if before 4:30 pm) or the overnight SMR (if after 4:30 pm). If residents or medical students are available earlier please do have them get started on seeing consults for their learning and for work-flow.

Who to ask for help?

- 1) Ward Senior: This is your first support. There is no specified threshold for when to call them for support; for example, if you receive 4 referrals spread over the course of the day, you could foreseeably complete all 4 without needing support. In contrast, if you receive 4 referrals in the first hour of the day, you should be calling the Ward Senior for assistance. The staff know that the Ward Senior is back-up to the ER Senior, and will release the Ward Senior to come assist (if you are having any difficulty with this, please inform the CMR).
- 2) Other members of call team: Again, we are working as a call team. If you have many referrals early in the day, ask for help. In addition to the ward senior, you can consider asking for help from the MCR

(especially for Med Consults, which they will take over as of 4:30 pm anyway), CNG (often free during the day to help), and JMRs/Orange fellows (recognizing they may not be done ward rounds until the early afternoon).

3) Your staff: If volumes are high despite receiving help from other members of the call team, call your staff for guidance and to discuss whether back-up activation is needed. You should be in close contact with your staff (not the CMR) during the day if things are busy so they can help you navigate this and are aware of the situation.

4) CMR: If, following discussion with staff, it is determined back-up is needed, then contact the CMR to facilitate this.

3. Ward Senior

Responsibilities

1) Ward rounding (typically with your medical students)

2) Back-up to ER senior

3) On rare occasions, the daytime Ward Senior may be asked to carry the senior Code Blue pager in the event that the Hospitalist team is unable to carry it for the day.

Work flow

Proceed to meet your team for ward rounds starting at 9am. You are expected to round on the ward with your team unless/until called by the ER Senior to help with consults if he or she has a large number pending. If you are called for assistance, inform your staff so they are aware. If the volume of consults decreases such that they can be managed by the ER Senior, return to the ward to continue rounding with your team. As above, if you face challenges being released from the ward by your staff, please let the CMR know.