

## Post Call Cover

1. Call the team the night before and make sure you know what time to start rounding with the team (this is per the attending). **At LBJ**, round with one team, and then the other the next post call. Or round with the team who is meeting earlier first and then the other team. Just talk with the attendings and come up with a plan (the chiefs at LBJ can help you with this if need be).
2. Also, make sure you are at work the latest by 8 am (if the attending is rounding later, etc). In case there is an emergency, you need to be here to help the team out.
3. Make sure the post call team members are out of the hospital by 12:30 pm (upper levels) and 12:45 pm (interns) so no one violates duty hours. **Start helping them with consults, discharges, orders at 11 am the latest to make sure everyone is out. If a resident or intern is in the hospital past 12:30, page the admin CMR immediately.**
4. You **HAVE** to come the first day (when residents start) as well as the 1<sup>st</sup> of the month (when the new interns start). You cannot take these days off just because new team members may be there who are not post call that day. It is your responsibility to check out to the float intern still.
5. Residents or interns other than the post call team cannot give you procedures to do or have you check out for them. If you would like to help them out (i.e. if an intern's upper level is off or in clinic and they need help with an LP), that would be great.
6. Speak with the attending(s) around 4-4:30 with any updates, and definitely call them earlier if an emergency arises (i.e. patient goes to MICU, passes away, etc).
7. Check out to the resident(s) later in the evening (by phone or email – whatever they prefer [but remember you need a digital ID and have to encrypt the email if you send patient names or medical record numbers]).