

Guidelines to Taking General Call

1. Who takes General Call: All the faculty members in the sections of Peds, Body, Chest, Neuro, Mammo and MSK take general call. Currently the sections of NIR and VIR do not take general call. In addition, the fellow associates from Body, Mammo and MSK also participate in general call.

2. General Call Assignment: General call will be assigned equally among the faculty members and fellow associates. The schedule is made by Dr Joan Maley and assisted by Jean Robinson (356-3767). Any trades for general call are to be made at an individual level and notification to be sent to Jean Robinson who will update the online calendar.

3. Duties of General Call Staff:

Weekdays: The staff radiologist on call is expected to staff out all plain radiographs that are preliminary interpreted by the junior resident on call starting at 5 PM until 8 AM the next morning.

The general call staff is expected to be available on pager starting at 5PM until 8AM the next morning, but is not required to be present in-house at all times. However the general call staff is expected **to come in-house at least once in the evening** to staff out and then sign out the overnight studies next morning as soon as possible. General call staff is suggested to touch base (in person or on the phone 68466) with the on call resident when they are in-house. This facilitates communication with the on call resident and allows an opportunity for immediate feedback if necessary. Feedback to the resident can also be given on the EPIC via inbox message.

Staff may choose any location to work. If they decide to work in the ETC, they are suggested to restrict their conversation/ discussions to only general call related urgent work since the resident has many more responsibilities (eg. head CTs, trauma, ETC phone calls) to handle simultaneously.

Weekends: The general call staff is expected to be available on pager starting at 8 AM – 8 AM the next morning, but is not required to be present in house at all times. The general call radiologist is expected to staff out all the plain radiographs done from 8 AM – 8 AM the next morning in a timely manner.

If the general staff radiologist does not feel comfortable interpreting any study, the subspecialty on call radiologist may be consulted (example: ortho film-call MSK, head/spine film-call Neuro, body film-call Body, chest film-call Chest).

If the general staff disagrees with the preliminary read or wants to add any comments to the prelim reads, they must add an addendum to the report rather than changing the prelim report.

Referring physician must be promptly notified by the general staff OR the on call resident for any significant changes to the report or actionable abnormalities.

4. Call trading and inability to take general calls:

Any trades for general call will be made at an individual level and notified to Jean Robinson via email or at 356-3767, who will update the online calendar.

If for some reason if the general staff cannot take call, they must inform the section head ASAP. If coverage cannot be arranged within the section, Dr Maley must be notified ASAP to arrange for coverage. Any one pitching in to help out with unscheduled absences will get a bonus of one less call for next two quarters☺.

5. Duties of On Call Junior Resident:

Weekdays: The on call junior resident is expected to prelim read all the plain radiology films done between 5 PM to 8 AM.

There is a batch of the adult ICU films (SNICU, MICU and CVICU) obtained everyday between 4 – 7 AM. The on call resident is expected to open and view these studies for actionable abnormalities. If there is an acute finding, example: line malposition or pneumothorax, then the film is to be dictated under the general staff and ordering provider notified promptly. The rest of the ICU films can be left for the chest staff.

Weekends: The on call junior resident is expected to prelim read all the plain films done between 8 PM to 8 AM on weekends.

There is a batch of NICU and PICU films obtained between 8 – 10 AM on weekends which are read by the on call Peds faculty. The on call resident does not need to look at these studies.

The resident on call is expected to **open ALL studies**. Below is a list of studies that **may be** assigned to subspecialty folder to be read the next morning.

☑ Post op ortho, unless an acute complication is identified

☑ Orthopedics and adult + Peds Rheumatology clinic films (unless a fracture or acute finding is seen)

☑ Bone age and bone survey for child abuse; however if a fracture is seen on an abuse case, this needs to be called to the ordering doctor and the resident should text page or talk with the pediatric staff on call.

☑ Routine scoliosis films

☑ Autopsy films

5. Procedure Coverage: The general call faculty covers the lumbar punctures from 5 – 10 PM on weeknights and 8-8 on weekends. The on call neuro fellow fields the calls and will notify the on call gen staff. The general call staff is asked to be immediately available in house. After 10 PM the neuro fellow will perform LPs independently.

6. Contacting General Call Faculty On Call: For any questions, the on call resident must first page the on call faculty. If they do not hear back from them, they may call the home/cell phone #. The list of home/cell phone numbers is available to the on call resident on the wiki. When an on call resident calls the faculty, they may text page with the specific question as well as the MRN (medical record number) of the patient. The faculty members are asked to call back the resident right away to ensure that they are aware of the on call question. This will prevent any further attempts of the on call junior resident to contact the faculty.

7. Faculty Stat Read Requests: If a stat faculty read is requested, then the on call resident may ask the clinical faculty requesting the stat read to contact the appropriate on call faculty directly.

8. OR Foreign Body Films:

On Call Foreign Body Films Workflow

1. **Send e-mail** to general call staff with anonymized JPEG image attached (instructions on WIKI)
 2. **Call** general call staff on their **cell phone**
 3. If no answer on cell phone, **page** staff
 4. **If no answer in 5 minutes**, page sub specialized faculty on call for the specific film in question (example: ortho film-call MSK, head/spine film-call Neuro, body film-call Body, chest film-call Chest).
 5. If no answer in 5 minutes, page any other staff on call until you reach someone
9. **Prelim reports on Keokuk films** may not be in the EPIC signing queue, so please check the power scribe queue for such studies.

Updated by Ad hoc committee on 7-14-2016

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