

Resident Night Expectation FAQs
Updated: January 2022

- **Who should write the delivery note overnight?**
 - The resident should write a delivery note and assign Apgar scores on **ALL** deliveries that are attended. If an Advanced Pediatric Practitioner (APP) attends the delivery with the resident they should write a separate note for billing – you should clarify with them who will write the note. Fellows are not responsible for overnight delivery notes unless they specifically tell you they will write the note.

- **Who should I co-sign my overnight delivery note to?**
 - In most cases, a resident will attend a delivery without an attending present and when they write their note, they should write and sign the delivery note **WITHOUT** a co-signer. However, if a NICU attending **attends** the delivery, the delivery note should be co-signed to that NICU attending. Notes should **NOT** be co-signed to a NICU attending or other provider if they were not present at the delivery.

- **Who do I tell about a delivery that I attend by myself with only the charge RN present?**
 - All deliveries should be discussed with the APP/fellow who is on or with the attending if no APP/fellow is on overnight. This can be done the next time you have a reason to talk to the NICU provider or at the end of the shift before you leave unless there is something more critical to discuss. This will allow for debriefing and will help the NICU providers be aware of all deliveries.

- **Who do I tell about a baby that needs to be admitted?**
 - **ALWAYS** tell the overnight APP/fellow/attending if there is an admission overnight.

- **Who should write the admission note overnight?**
 - The APP and resident can alternate admission notes if the unit is very busy. An attempt should be made for the residents to admit patients going to the resident team and the APPs to admit patients going to the APP team, although this will likely not be perfect!
 - If you are only on overnight with an attending or fellow, the notes will be the resident responsibility, unless discussed otherwise.

- **Who should I co-sign my overnight admission note to?**
 - Residents should co-sign their admission notes to the overnight attending.
 - **Residents will be expected to enter the problem list in EPIC** for each patient that is admitted, so that they can think critically about all admissions.

- **What do I do overnight if a newborn from the UW Hospitalist Group (which also includes GPAM, Associated Physicians, UPH Pediatrics, and UPH Family Medicine) has an issue?**
 - Newborns covered by the UW Hospitalist Group, including the above groups, will be seen by a NICU resident and staffed with a NICU provider. Issues that do not need to be run by an attending physician overnight can be signed out to the Newborn Nursery service in the morning. If the NICU resident has questions, they should be staffed with the overnight APP/fellow. If an attending needs to see the newborn, the NICU attending should be notified. Notes should be entered appropriately in the patient's chart,

however, they should **NOT** be co-signed over to the NICU attending unless the attending sees the infant.

- **What do I do overnight if a newborn from Group Health Cooperative (GHC) has an issue?**
 - GHC attendings take the first call for GHC newborn issues. If a newborn needs to be seen by a provider, the GHC attending will contact the overnight NICU resident. The resident will then “close-the-loop” and staff this patient with the GHC attending. If the GHC attending wishes for the infant to be seen by the NICU, the NICU resident should then staff the infant as a consult with the NICU attending. If the GHC provider wishes that the infant be admitted to the NICU, the NICU APP/fellow/attending should be notified and the patient admitted to the NICU.

- **What do I do overnight if a newborn from the Family Medicine (including Wildwood) team has an issue?**
 - The Family Medicine attending will be called first for any newborn issues. If a newborn needs to be seen by a provider, the Family Medicine attending will have the Family Medicine resident see the infant. If the Family Medicine team wishes for the infant to be seen by the NICU, the NICU resident should see the baby and this should be staffed as a consult with the NICU attending. (Note: you must “close-the-loop” with the Family Medicine attending first if they are not asking for an official NICU consult.) If the Family Medicine attending wishes that the infant be admitted to the NICU, the NICU APP/fellow/attending should be notified and the patient admitted to the NICU.
 - Bottom Line: If an RN calls you to see a Family Medicine baby, tell them to have the Family Medicine resident or attending reach out to you before you can see the baby.
 - **If the RN is having issues getting ahold of the Family Medicine resident/attending and the infant has an urgent issue, please do not delay care; however, you must notify and update the Family Medicine team.**

- **What if a Newborn Nursery RN asks me to talk to the parents of a Family Medicine newborn, but the Family Medicine service has already taken care of the issue?**
 - If an RN asks you about a newborn on the Family Medicine team, let them know that in order for you to see the patient, the Family Medicine resident/attending must reach out to you first.