Date Received:

## EMERGENCY MEDICINE RESIDENCY PROGRAM

## 2009-2010 Academic Year

## Vacation Request Form

Resident	Name:			Date:	
Resident		EMY 1	EMY 2	EMY 3	
Vacation	Request: (	Please list in	order of prefe	erence)	
Week 1:	From:		To:	Rotation:	Approved:
Week 2:	From:		To:	Rotation:	Approved:
Week 3:	From:		To:	Rotation:	Approved:
Week 4:	From:		To:	Rotation:	Approved:
EMY-2	-3 weeks v -4 weeks v -4 weeks v	acation	Note: One	week of vacation = 2 week	kend days & 5 weekday days
			ete? Yes held until all rec	No quired paperwork is com	
IMPORTA EMY 1	ANT GUIDE	ELINES FOR T	TAKING VACAT	ION:	
Va Su Ol	Vacations may not be scheduled during Oral Surg/Ophtho and MICU. Surgery (Maximum of 4-5 days off and can only be during one of your surgery months). OB vacation is allowed, but only on specific weeks (not during night float week). Special approval from the rotation department is required for any other off service month.				
EMY 2 Va Va	acations may acations duri acations may	not be schedule ng Plastic Surge be scheduled d	ed during EMS/Radery must be coordinuring Hurley Traus	diology.  nated so the resident is here on the man and the man are often not determined.	during Drs. Barry & Zacharek's call.
EMY 3	eciai approv	ai is required to	or any other off serv	vice month.	
Va	acations may			ma, but shifts are often not ovice month.	decreased.
ED rotation	ıs:	•	•		
				te, 1 <sup>st</sup> serve basis and based of the last 2 weeks of December	
				Cooper ED during the last 2 v	
Other cons				ı c	
				garding Resident Time Off.	
				eek on an off-service rotation	n
				ne off-service rotation.  M In-training exam: Wednes	day, February 24, 2010

Updated: May 22, 2009