

## **RESIDENT/FELLOW LEAVE OF ABSENCE**

Please see the institutional Leave of Absence/Protected Leave Policy (LOA Policy).

[https://my.mainehealth.org/mmc/Departments/HR/Documents/Time%20Away%20from%20Work/Protected%20Leaves%20Policy%2012012014\\_MH.pdf](https://my.mainehealth.org/mmc/Departments/HR/Documents/Time%20Away%20from%20Work/Protected%20Leaves%20Policy%2012012014_MH.pdf)

In addition to the LOA policy, we want Residents/Fellows to understand how they can also plan to meet their program requirements. While program requirements do not in any way limit a Resident's/Fellow's right to take a protected leave, it is important that the Resident/Fellow understand how much, if any, of their time away may need to be made up before either advancing to the next postgraduate training level or graduating from the program.

Therefore, if a Resident/Fellow is planning or expects they will be taking a LOA, they must meet with their Program Director and Program Administrator to complete the attached DME Leave of Absence form. The completed form must be returned to the central DME office for filing.

## **Your Leave of Absence as a Resident/Fellow**

### ***Your Checklist:***

As a Resident/Fellow at Maine Medical Center, you are a regular employee and all MMC policies regarding a Leave of Absence (LOA) apply to you. If you are planning to go out on a leave of absence (e.g. Maternity Leave) this checklist can help us guide you through that leave process:

- Call Unum at 877-352-8818. They will discuss your options and rights with you.
- Meet with your program director and let them know about your plans.
  - Bring this checklist to your meeting
  - It's important that you understand your program requirements with respect to time away from the program. Every program's requirements are different and you need to understand whether or not you'll need to make up any of your time away.
- Complete the fields below with your program director and administrator and submit this checklist to the central DME office. (The central DME office is responsible for working closely with HR and payroll to ensure residents and fellows are paid correctly while on a LOA.)

### ***Your sick/vacation time balances:***

I currently have \_\_\_\_\_ sick days and \_\_\_\_\_ vacation days available to me. (*You'll get these numbers from your Program Administrator*)

### ***Understanding Your Program and/or Specialty Board Requirements:***

Based on my discussion with my program director, I understand the following about my program/specialty board requirements:

- If I am away from my program for more than \_\_\_\_\_ [*circle one:* days / weeks] I have to make that time up.
- I understand that, as a result of this time away from my program, either my program year advancement or graduation date could be postponed/extended until all program requirements have been met.

\_\_\_\_\_  
Signature of Resident/Fellow

res \_\_\_\_\_  
Date