

| Request for GMEC Approval of Duty Hour Extension                                                                                                                                                                             |                                 |                 |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------|-----------------|
| Program Director                                                                                                                                                                                                             | Program                         | Submission date |
| State the circumstances under which residents may be expected to be on duty more than 80 hours per week, averaged over 4 weeks. Include the specific rotations and the year of training for which the request is being made. |                                 |                 |
| State why the program cannot maintain the 80-hour limit                                                                                                                                                                      |                                 |                 |
| State the improvement in educational experience that is anticipated to result from this increase in duty hours. This may include RRC requirements the program will not meet if residents work 80 or fewer hours              |                                 |                 |
| State how the program will monitor resident hours to assure compliance with the duty hour rules.                                                                                                                             |                                 |                 |
| Submission date                                                                                                                                                                                                              | Program Director's Signature    |                 |
| <b>Chairman's Attestation of Support:</b> I concur that extension of duty hours to 88 hours per week on the specified rotations is needed to enhance the training of our residents.                                          |                                 |                 |
| Date                                                                                                                                                                                                                         | Department Chairman's Signature |                 |