

S	Set expectations for when to be notified
	“ I’d like you to call me if a patient is discharged, goes to the ICU, goes to surgery or is transferred to another service”
U	Uncertainty is a time to contact
	“It is normal to feel uncertain about clinical decisions. Please do contact me if you feel uncertain about a specific decision”
P	Planned communication
	“Let’s talk around 10pm tonight. If you get busy or forget I will contact you.”
E	Easily available
	“ I am easy to reach by page, or you can use my cell phone or my home phone”
R	Reassure resident not to be afraid to call
	“ Don’t worry about waking me up, or if calling is a sign of weakness, or that I will think you are stupid. I would rather know what is going on.”
B	Balance supervision and autonomy for resident
	“ I want you to be able to make decisions about our patients, but I also know this is your first month as a resident so I will follow closely”

S	Seek attending physician's input early
	"Involving your attending early can often prevent delays in care and provide quicker results. They are also legally responsible for patients."
A	Active clinical decisions
	"Contact your attending if an active clinical decision is being made (surgery, invasive procedure, etc)"
F	Feel uncertain about clinical decisions
	"It is normal to feel uncertain about clinical decisions. You should contact your attending if you feel uncertain about a specific decision"
E	End-of-life care of family/legal discussions
	"These complex discussions can change the course of care. Families and patients should also know that the attending is aware of the discussion"
T	Transitions of care
	"Transitions are risky for patients. Contact your attending if someone is being discharged, transferred to another service, ICU, or hospital"
Y	You need help with the system/hierarchy
	"Despite your best efforts, system difficulties and the hierarchy may hinder care for patients. Attendings can help expedite care through direct attending involvement with consultants"