Residency program leave policies offer new parents some clarity

MAR 8, 2022

Brendan Murphy
Senior News Writer

A biological clock and physician training calendar rarely align in a convenient manner.

Diagnostic radiology resident Nikita Consul, MD was pregnant during her fourth year of residency training with the aim of having the child during her less rigorous, elective-heavy final year. That plan, however, had a couple of bumps in the road.

“I got pregnant a couple months before my boards were scheduled in June,” said Dr. Consul, an AMA member. “That was a little frightening. I was at my peak of morning sickness while taking my board exams over all three of the examination days. It was during COVID so exams were virtual, which ended up being a real lifesaver. My mom was luckily with me and graciously cooked me certain foods that I could tolerate during the short breaks between sections of the exam.”

Now the mother of a healthy newborn baby, Dr. Consul is in the midst of a 12-week maternity leave.

Though it’s largely unpaid, she believes the full amount of leave may not have been possible were it not for policies put in place over the past year by the American Board of Medical Specialties (ABMS) and American Board of Radiology.

The ABMS policy calls for all “a minimum of six weeks of time away from training for purposes of parental, caregiver and medical leave at least once during training, without exhausting all other allowed time away from training and without extending training.” The policy does not make mention of if the leave is to be paid or unpaid. It does, however, grant that “member boards must allow all new parents, including birthing and non-birthing parents, adoptive/foster parents, and surrogates to take parental leave.” So new fathers or non-birthing are able to take the leave.

Learn about JAMA research on residency programs’ childbearing and family-leave policies.
Having a child shouldn’t extend training

Dr. Consul had been pondering having children throughout her training, but the leave policies she had heard about from residents throughout the country were inconsistent. And that made an always challenging decision even more difficult.

“Two years ago, I was not sure which way things were going to go,” she said. “Every female resident was taking a different number of weeks off, depending on what worked for the program. They were offered: If you need more weeks let us know. But I was also warned by several former residents that if it interfered with the program training or caused problems in coverage, I should not ask for it, or may need to make up time at the end.”

What the ABMS policy has done, with specialty societies following suit in line with AMA policy, is offer a measure of clarity on parental leave.

When she has a baby later this coming spring, AMA member Kiernan McAvoy, MD, will do so at the end of her residency. But she will not be required to extend her training and will be allowed to move along to fellowship—another stipulation of the new ABMS policy.

“So many of us are in the prime of our childbearing years,” said Dr. McAvoy, an internal and geriatric medicine resident at Medical College of Wisconsin. “It was good to know that I would have protections and not have to extend my training because I made the decision to have a child.”

Sara Beltrán Ponce, MD, is a third-year radiation oncology resident at the Medical College of Wisconsin who just had her second child during residency training. Her leave will consist of five weeks of accrued sick time, two weeks of vacation time and one week of unpaid time off.

Dr. Beltrán Ponce, an AMA member, said she has felt supported by her institutions during both pregnancies. She was given the option to take a full 12-week maternity leave but decided against spending five weeks of unpaid time away from work.

“I am actually lucky that I am training where I am from, so I have my parents and my husband’s parents to help with childcare when I go back,” she said. Nevertheless, she added, for resident physicians to return to work after only six weeks of parental leave “is really challenging without a strong support system.”

Read about the top four frustrations for physician moms returning to work.