**Brigham and Women’s Hospital Surgery Residency**

**2019 – 2020 Guidelines for Wellness of Lactating Surgical Residents**

The Brigham and Women’s Hospital Surgery Residency Program is committed to supporting the health and wellbeing of our diverse residency. These guidelines are intended to ease the transition back to clinical practice for residents who choose to breastfeed or pump following returning from maternity leave. The Department of Surgery supports this decision and the following guidelines.

1. Challenges faced by lactating surgical residents
	* Pumping following return to work requires flexibility in scheduling that can be challenging in the clinical setting
		+ Infrequent or insufficient time for pumping can lead to complications including plugged ducts and mastitis as well as decreasing or insufficient supply
	* Trainees may be reticent to ask faculty, peers, or subordinates for flexibility in or assistance with delegation of tasks to allow for pumping following return to work
	* While each individual is different in their requirements, generally 30 to 45 minutes are required per session every 3 to 4 hours
2. Responsibilities of lactating resident
	* Ongoing prioritization of patient care and careful consideration for clinical continuity, which can be impacted by time needed to pump
	* Clear communication with program director, attending surgeons, and co-residents on service regarding specific needs for lactation (time interval, specific concerns) with advanced notice as able provided to the Program Director regarding plans to pump in order to facilitate planning
3. Role specific considerations
	* Resident on ward
		+ If designated lactation rooms are not available or practical, site and service specific rooms (or other appropriately refrigerator-equipped locations) will be designated and prioritized as a daytime lactation room (8AM-5PM) for any team with a lactating resident
		+ Clear communication with team members (co-residents, PA, NPs) regarding pumping needs
	* Resident in clinic
		+ Lactating resident will be expected to leave clinic to pump at reasonable intervals and will preschedule this during the clinic day, coordinating with the faculty and team
	* Resident in operating room
		+ Attending surgeons on each service will be notified at the start of the rotation that the resident will require lactation breaks, including during prolonged procedures
		+ Attending surgeon and resident will discuss lactation if needed before or during a procedure
		+ Lactating resident will minimize interruption to operating team by pumping before or after cases whenever possible and will not leave during critical portions of the operation
		+ Lactating resident will reach out to available team members to serve in her absence as needed
	* Resident in conference
		+ Lactating residents are allowed to leave mandatory teaching conference for pumping if necessary, although in the absence of clinical conflict preventing pumping before or after, should prioritize educational opportunities

4. Departmental Support

* + The Department of Surgery is committed to ensuring the well-being and health of all its trainees and offers its full support of this lactation policy All faculty and supervising residents/fellows will be made aware of this policy, and adherence and support are expected
	+ If issues or concerns arise, the Program Director will lead conflict resolution to define and meet the lactating resident’s specific needs
	+ The Department will ensure that there are appropriate lactation and storage facilities at all sites
	+ Any concerns should be directed to the Program Director and/or Surgery Education Office