

**Best Practice Guideline for Well-being:  
Lactation Support for Residents and Fellows  
Office of Graduate Medical Education  
UCSF School of Medicine**

**Background:**

National guidelines recommend that infants receive human milk exclusively for the first six months of life, with continued human milk for at least the first year of life. This recommendation is based on health benefits to both infants and lactating parents.

Returning to work is associated shortened duration of lactation. Reduced milk supply can result both from the stress of returning to work and use of a pump for milk expression. When directly feeding is not possible, milk expression (pumping) at regular intervals is necessary to maintain milk supply and prevent discomfort or infection (mastitis). Although the necessary interval varies from person to person, most people need to express milk every 2-4 hours, and in general, each person needs 20-30 minutes for milk expression and storage. Despite these physiologic needs, workplace schedules often do not provide proactive support to easily enable breaks for pumping.

At UCSF, several hundred residents and fellows have dependents. Since timing of residency and fellowship training frequently coincides with optimal timing for childbearing, each program should have a plan in place to provide proactive support for trainees who are lactating.

The ACGME (see below for links to requirements), UCSF GME (Appendix A), and the University of California (Appendix B) all have requirements to support lactating trainees and employees. Additionally, UCSF Health recently established a policy requiring schedule holds for pumping breaks in ambulatory schedules (Appendix C). This Best Practices Guide provides strategies for programs to support residents and fellows who are lactating, in alignment with ACGME, UC, and UCSF policies.

**Principles in Support of Best Practices**

- **Normalization:** Milk expression is a physiologic need and should be anticipated as a routine aspect of returning to work after childbearing leave. Trainees should be supported to meet this need without concern for retaliation or negative impact on clinical training and educational experience.
- **Transparency:** Resources to support lactating trainees should be easily accessible. Programs should provide information about options to have protected time for pumping during specific rotations.
- **Proactiveness:** Programs should have a process in place for reaching out to any trainee prior to anticipated childbearing leave and prior to return to work, in order to share resources and options for lactation support.
- **Customization:** As with any accommodation, specific needs and resources for lactation support should be discussed and adapted for each individual.

## Facilities for Pumping and Milk Storage

Each clinical site maintains dedicated lactation spaces in accordance with their institutional policies. UC policy (PPSM84) defines lactation rooms as: A private and sanitary space in close proximity (5-7min walk) to work area, including appropriate temperature and ventilation, and quipped with a table, comfortable chair, and electrical outlet. Restrooms, spaces lacking privacy, or spaces lacking a locking door are not considered appropriate spaces for lactation purposes. If possible, the lactation space either will be located near a source of running water or will have a sink with running water in it. Some of these spaces are combined with call rooms, and some require access permissions. For additional details, see the Campus Life website: <http://tiny.ucsf.edu/lactationrooms>. Programs that have questions or need guidance on determining an appropriate additional/temporary lactation space can contact Caroline Wick, Family Services Specialist ([caroline.wick@ucsf.edu](mailto:caroline.wick@ucsf.edu)).

## Best Practice Guidelines for Supporting Lactating Trainees

1. **Designate a programmatic point person:** Each program should designate a point person (program leadership or administration) whose responsibilities include:
  - a. Contacting trainees to share information about available lactation support options and learn from the trainee about their needs.
  - b. Ensuring that information is easily accessible to program faculty and trainees
  - c. Soliciting feedback from trainees about barriers to implementation.
  - d. Contacting supervising faculty (as desired by trainee) to make them aware of lactation accommodations.
  
2. **Create a program resource including rotation-specific lactation accommodations:** Each program should maintain information on file about institutional lactation support as well as rotation-specific accommodations that are available to trainees in their program (see Appendix D). This information should include:
  - a. **Institutional resources:**
    - i. List of available facilities and access to hospital grade pumps: <http://tiny.ucsf.edu/lactationrooms>
    - ii. How to register for the UCSF Lactation Accommodation Program and obtain a free cooler bag: <http://tiny.ucsf.edu/lactationregister>
    - iii. Information on obtaining badge access to lactation rooms: [lactationprogram@ucsf.edu](mailto:lactationprogram@ucsf.edu)
    - iv. Who to contact for room cleaning/functionality: [lactationprogram@ucsf.edu](mailto:lactationprogram@ucsf.edu)
    - v. Contact information for Office GME if persistent issues recur: [Amy.Dayrossa@ucsf.edu](mailto:Amy.Dayrossa@ucsf.edu)
    - vi. Instructions for seeking formal accommodations if larger schedule modifications are required: [Disability-Management Services](#)

- b. **Suggested minimum accommodations for different types of rotations (*note: if lactation spaces are more than 5 minutes from the site of work, times should be adjusted to account for travel to and from the location*):** A reasonable amount of time for a lactation break is generally 30 minutes every 2-4 hours, which includes the time associated with travel to and from the lactation space, expressing milk, clean up, and storage. If additional break time and accommodations are needed beyond required and recommended provisions, please contact [Disability-Management Services](#)
  - i. **Inpatient-procedural:** one 30-minute slot between cases every 2-4 hours
  - ii. **Inpatient-non-procedural:** one 30-minute slot free from direct patient care responsibilities every 2-4 hours
  - iii. **Ambulatory:** 30 minutes blocked out each half day clinic session
  - iv. **Didactics:** Ability to leave didactics for 30 minutes every 2-4 hours as needed, ideally with option to join remotely if desired.
  - v. **Research:** Ability to leave for 30 minutes every 2-4 hours as needed, ideally with option to join remotely if desired.
- c. **Considerations for who can cover any direct patient care responsibilities during a trainee absence.** To whatever extent possible, programs should proactively determine how direct patient care responsibilities (e.g., clinic slots, responding to an admission pager or urgent consult) could be covered during the pumping time.
  - i. Trainees should not have to “make up” time spent in pumping unless there is a concern for meeting ACGME requirements. Programs should explore options for accommodations that would not significantly differentially impact the educational experience over the course of a year of lactation.
  - ii. As possible, efforts should be made to avoid shifting significant additional work (e.g. additional clinic sessions, higher patient volumes) to other trainees or faculty without commensurate compensation.

### 3. Provide proactive outreach

- a. **Before parental leave:** Programmatic point person should contact trainee to share institutional and departmental resources for lactation support and accommodations, in addition to other information about parental leave.
- b. **Prior to return to work:** Programmatic point person should contact trainee to discuss any anticipated lactation support needs. This discussion should include:
  - i. Reminder about available lactation spaces and institutional contacts.
  - ii. Determination of needed lactation accommodations for pumping on clinical rotations.
  - iii. Offer to reserve lockable/private departmental space for lactation purposes, if designated institutional lactation spaces are located no more than a 5-7 minute walk from clinical work space or are not available due to high room demand.

- iv. Offer to contact rotation director or clinical supervisor with details of lactation accommodation (if trainee desires).
4. **Obtain regular feedback from trainees:** Designated programmatic point person should solicit feedback about the success of institutional/facility support for lactation and programmatic lactation accommodations.
5. **Consider adjunctive departmental support:** Departments that aspire to support equity and family-friendly workplaces may consider additional resources to optimize well-being for lactating trainees and their colleagues. Examples include:
  - a. Departmental fund to support pumping supplies not typically covered by insurance (e.g., wearable pumps)
  - b. Department-funded lactation space
  - c. RVU credit to support faculty coverage for blocked out trainee clinics
  - d. Departmental lactation committee that includes trainees, faculty, and administrators

## References

AAFP Breastfeeding and lactation for medical trainees:

<https://www.aafp.org/about/policies/all/breastfeeding-lactation-medical-trainees.html>

Gracey LE, Mathes FE, Shinkai K. Supporting Breastfeeding Mothers During Dermatology Residency: Challenges and Best Practices. *JAMA Dermatology*. 2020; 156(2): 117-18

Peters et al. Lactation Challenges of Resident Physicians: Results of a National Survey. *BMC Pregnancy Childbirth*. 2020; 20: 762. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7724857/>

Rangel et al. Pregnancy and Motherhood During Surgical Training. *JAMA Surg*. 2018 Jul; 153(7): 644–652.

## ACGME, UCSF, and UC Resources

- **ACGME Residency Common Program Requirements (page 6):**  
<https://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/CPRResidency2020.pdf>
- **ACGME Fellowship Common Program Requirements (page 6):**  
<https://www.acgme.org/Portals/0/PFAssets/ProgramRequirements/CPRFellowship2020.pdf>
- **UCSF Campus Life Resource Site for Lactation Support:**  
[https://campuslifeservices.ucsf.edu/familyservices/services/lactation\\_accommodation\\_program/lactation\\_rooms](https://campuslifeservices.ucsf.edu/familyservices/services/lactation_accommodation_program/lactation_rooms)
- **UCSF Disability Resources:** [Disability-Management Services](#)
- **UC Policy for Accommodations for Nursing Mothers:**  
<https://policy.ucop.edu/doc/4000609/PPSM-84>

## **Appendix A**

### **UCSF GME Lactation Policy**

Each program, in partnership with the Sponsoring Institution and participating sites, must ensure healthy and safe learning and working environments that promote resident and fellow well-being and provide for clean and private facilities. This includes providing space for lactation that has refrigeration capabilities, with proximity appropriate for safe patient care as well as time to pump.

Program directors must work collaboratively with site directors and supervising faculty to have a pro-active plan in place to ensure residents and fellows who are lactating have protected time at regular intervals for pumping on all types of rotations, including in-patient, ambulatory, research, etc. Information regarding options for protected time should be provided to residents and fellows prior to taking parental leave, at the time the leave is discussed.

*Approved, GMEC: December 14, 2020*

## Appendix B

University of California – Policy PPSM 84



# PPSM 84: Accommodations for Nursing Mothers

[PPSM-84: Adaptaciones para madres lactantes](#)

[PPSM-84: 為哺乳母親提供的便利](#)

[PPSM-84: Mga Akomodasyon para sa mga Inang Nagpapasuso](#)

<b>Responsible Officer:</b>	Vice President – Systemwide Human Resources
<b>Responsible Office:</b>	SHR – Systemwide Human Resources
<b>Issuance Date:</b>	12/10/2018
<b>Effective Date:</b>	12/10/2018
<b>Last Review Date:</b>	11/15/2018
<b>Scope:</b>	Professional & Support Staff, Managers & Senior Professionals, and Senior Management Group members

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## **I. POLICY SUMMARY**

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In promoting a family-friendly work environment, the University of California recognizes the importance and benefits of breastfeeding for both mothers and their infants. The University will make private space available for lactation purposes and will provide lactation break periods for employees who are breastfeeding (hereinafter referred to as “nursing mothers”).

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## **II. DEFINITIONS**

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Detailed information about common terms used within Personnel Policies for Staff Members can be found in [Personnel Policies for Staff Members 2 \(Definition of Terms\)](#).

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## **III. POLICY TEXT**

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### **A. Lactation Facilities**

The University will provide, in close proximity to the nursing mother’s work area, appropriate sanitary and private space with a table, electrical outlet, and comfortable chair.

### **B. Lactation Break Period**

The University will provide a reasonable amount of break time to accommodate the needs of nursing mothers.

#### **1. Exempt employees:**

In accordance with [Personnel Policies for Staff Members 30 \(Compensation\)](#), the time provided for lactation break periods does not need to be recorded.

#### **2. Non-exempt employees:**

If possible the nursing mother’s lactation break period should be concurrent with an existing rest period. If the lactation break period cannot run concurrently with the rest period, the University will make separate lactation break time available. The separate lactation break period will be unpaid.

Supervisors are encouraged to allow flexible scheduling, whenever possible, to accommodate lactation breaks.

No negative employment actions will be taken when requests for accommodation are made pursuant to this policy.

### **C. Other Reasonable Accommodation**

The University will provide other reasonable accommodation or transfer to a less strenuous or hazardous position upon receipt of information from the nursing mother’s health care provider stating that a reasonable accommodation or transfer is medically advisable.

## **IV. COMPLIANCE/RESPONSIBILITIES**

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### ***A. Implementation of the Policy***

The Vice President–Systemwide Human Resources is the Responsible Officer for this policy and has the authority to implement the policy. The Responsible Officer may develop procedures or other supplementary information to support the implementation of this policy. The Responsible Officer may apply appropriate interpretations to clarify the policy provided that the interpretations do not result in substantive changes to the underlying policy.

The Chancellor is authorized to establish and is responsible for local procedures necessary to implement the policy.

In accordance with [Personnel Policies for Staff Members 1 \(General Provisions\)](#), the authorities and responsibilities delegated to the Chancellor in this policy are also delegated to the Executive Vice President–Chief Operating Officer, Vice President–Agriculture and Natural Resources, Principal Officers of the Regents, and the Lawrence Berkeley National Laboratory Director. Also in accordance with [PPSM 1](#), the authorities granted in this policy may be redelegated except as otherwise indicated.

### ***B. Revisions to the Policy***

The President is the Policy Approver and has the authority to approve policy revisions upon recommendation by the Vice President–Systemwide Human Resources.

The Vice President–Systemwide Human Resources has the authority to initiate revisions to the policy, consistent with approval authorities and applicable *Bylaws* and *Standing Orders* of the Regents.

The Executive Vice President–Chief Operating Officer has the authority to ensure that policies are regularly reviewed, updated, and consistent with other governance policies.

### ***C. Approval of Actions***

Actions within this policy must be approved in accordance with local procedures. Chancellors and the Vice President–Systemwide Human Resources are authorized to determine responsibilities and authorities at secondary administrative levels in order to establish local procedures necessary to implement this policy.

All actions applicable to PPSM-covered staff employees who are not Senior Management Group members that exceed this policy, or that are not expressly provided for under any policy, must be approved by the Vice President–Systemwide Human Resources.

### ***D. Compliance with the Policy***

The following roles are designated at each location to implement compliance monitoring responsibility for this policy:



The Top Business Officer and/or the Executive Officer at each location will designate the local management office to be responsible for the ongoing reporting of policy compliance.

The Executive Officer is accountable for monitoring and enforcing compliance mechanisms and ensuring that monitoring procedures and reporting capabilities are established.

The Vice President–Systemwide Human Resources is accountable for reviewing the administration of this policy. The Director–Systemwide Human Resources Compliance will periodically monitor compliance to this policy.

### ***E. Noncompliance with the Policy***

Noncompliance with the policy is handled in accordance with Personnel Policies for Staff Members [62](#), [63](#), and [64](#) pertaining to disciplinary and separation matters.

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## **V. PROCEDURES**

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### ***A. Lactation Facilities***

The University will provide a locked, private space that is sanitary--including appropriate temperature and ventilation--and equipped with a table, comfortable chair, and electrical outlet. If possible, the lactation space either will be located near a source of running water or will have a sink with running water in it.

The space will be in close proximity to the nursing mother's work area, generally not more than a 5-7 minute walk.

Appropriate lactation facilities include, but are not limited to, the employee's private office, another private office not in use, a conference room that can be secured, a multi-purpose room, or any available space with a locking door that is shielded from view and free from intrusion from co-workers, students, and the public.

Restrooms, spaces lacking privacy, or spaces lacking a locking door are not considered appropriate spaces for lactation purposes. However, an anteroom or lounge area connected to a restroom may be sufficient if the space is private, free from intrusion, and can be locked and shielded from view.

### ***B. Accommodation Requests***

A nursing mother is encouraged to discuss needs, in terms of accommodations as well as the frequency and timing of breaks, with her supervisor. These shared discussions will help nursing mothers and supervisors arrange for mutually agreeable break times, typically 2-3 times a day.

A supervisor who receives a lactation accommodation request will work, as needed, with a Human Resources representative or the location's breastfeeding support program representative to identify available appropriate space and determine a break schedule. Break schedules should be based on the needs of a nursing mother and the operational considerations of the University.

### **C. Recourse**

An employee who has comments, concerns, or questions regarding the University's *Policy On Accommodations for Nursing Mothers* should contact the local Human Resources Office or the location's breastfeeding support program.

A nursing mother who believes appropriate accommodations have not been provided should contact the local Human Resources Office.

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## **VI. RELATED INFORMATION**

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- [\*Personnel Policies for Staff Members 30 \(Compensation\)\*](#) (referenced in Section III.B of this policy)
- [\*California Fair Employment and Housing Act, Government Code Section 12926\*](#)
- [\*California Family Rights Act, Government Code Section 12945\*](#)
- [\*California Labor Code Section 1030-1033\*](#)
- [\*Fair Labor Standards Act – 29 U.S.C 207.r.1\*](#)
- [\*Patient Protection and Affordable Care Act – Section 4207 \(Reasonable Break Time for Nursing Mothers\)\*](#)
- [\*U.S. Department of Health and Human Services Agency – The Business Case for Breastfeeding\*](#)
- [\*Personnel Policies for Staff Members 2 \(Definition of Terms\)\*](#)
- [\*Personnel Policies for Staff Members 2.210 \(Absence from Work\)\*](#)
- [\*Personnel Policies for Staff Members 81 \(Reasonable Accommodation\)\*](#)
- [\*Lawrence Berkeley National Laboratory – For Nursing Mothers\*](#)
- [\*UC Berkeley – Breastfeeding Support Program\*](#)
- [\*UC Davis – Breastfeeding Support Program\*](#)
- [\*UC Irvine – Lactation Accommodation Guidelines\*](#)
- [\*UC Los Angeles – Lactation Accommodation Procedures\*](#)
- [\*UC Merced – Lactation Accommodation\*](#)
- [\*UC Office of the President – Lactation Program for New Mothers\*](#)
- [\*UC Riverside – Lactation Accommodation Program\*](#)
- [\*UC San Diego – Lactation Accommodation Policy\*](#)
- [\*UC San Francisco – Lactation Accommodation Program\*](#)
- [\*UC Santa Barbara – Lactation Accommodation Program\*](#)

## **VII. FREQUENTLY ASKED QUESTIONS**

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### **1. What is considered a reasonable lactation break?**

Generally, nursing mothers need 2-3 lactation breaks during an eight (8)-hour work period. A reasonable amount of time for a lactation break generally will not exceed 30 minutes per break and includes the time associated with travel to and from the lactation space, expressing milk, clean up, and storage.

### **2. Will a refrigerator for storing milk be provided by the University?**

When feasible, yes.

### **3. How will the University plan for new lactation facilities or for improving current ones?**

New building plans as well as plans for renovating existing University buildings should consider the need for inclusion of appropriate lactation facilities. UC can lead the way in taking lactation accommodation from simply accommodation to truly best practices.

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## **VIII. REVISION HISTORY**

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Policy changes effective as of **December 10, 2018:**

- Removed existing gendered pronouns and replaced with gender-neutral language.
- Updated web and document links, office titles, and typographical amendments.
- Remediated to meet Web Content Accessibility Guidelines (WCAG) 2.0.

Initial issuance effective **July 3, 2013.**

## Appendix C

### 10.22.20 Email Message to Physicians

Dear Colleagues,

In our efforts to support gender equity and the work experience at UCSF Health, we write to communicate about improvements being made to support lactating parents in the clinical ambulatory work environment upon return from childbearing leave as well as ongoing efforts for other clinical environments.

#### Background

Breast feeding has numerous benefits for mothers/lactating parents and babies including potential reductions in disease risk, antibody transference, promotion of a healthy weight, reduced risk for post-partum depression and convenience for parent and baby. Despite excellent breastfeeding initiation rates, lactating clinician parents as a group are at risk of premature lactation cessation, citing lack of sufficient time and adequate place for milk expression at work.

When working in a productivity model in clinical work, as most of our ambulatory physicians do, the time needed to pump also results in decreased productivity and pay. This may affect salary, access to bonuses and scribes, as well as staffing resources for the clinic. The message we are sending our lactating physician parents is that they are not meeting productivity standards due to lactation, pressures not faced by non-lactating parents.

#### Improvement

In order to address this inequity and to further support lactating parents returning from leave, UCSF Health will now offer 1 year of support to those lactating after a childbearing leave. Physicians, trainees and Advanced Practice Providers returning from childbearing leave will now be allowed to schedule one 30-minute lactation hold per half day clinic session for up to 1 year after the birth date of a child. For physicians who are paid on a productivity model rather than as a salaried provider, 1.5 wRVU credits for each hold will be provided to the clinician's home department on a quarterly basis for disbursement of funds to the clinician. This support will begin on **November 1<sup>st</sup>** for UCSF Health and SF Benioff Children's Hospital West Bay clinic sites. We anticipate clinics at Benioff Children's Hospital Oakland to follow shortly. Further details regarding how to use this benefit will be shared directly with all parents returning from child bearing leave. For APPs who rely on an RVU target, the target will be reduced by 1.5 wRVU credits per lactation hold.

The program will be assessed for impact after the first year.

#### Lactation Support for Other Clinical Environments and Professional Groups

While the productivity deficit and protecting time for ambulatory providers is addressed here, the struggle to find adequate time and proximal and functional spaces for lactation is felt by all lactating parents. The above described work in the ambulatory environment is the first step in a multistep effort with future efforts looking specifically in our hospital-based practices and across our clinical environments.

*Additional steps include: attention to lactation space availability and outfitting, improvement in resources and supplies, cultural factors to support lactating parents, and impact on productivity/RVU penalties in other clinical environments.*

A culture that supports lactation and lactating parents depends on us all. These challenges continue to be addressed in consultation with departmental leadership, focus groups with lactating parents, and the campus lactation services leadership.

Ongoing work includes:

- Listening tours to understand the challenges faced in various clinical settings with recommendations for additional areas of focus will be completed by December 2020
- Identification of new spaces proximal to work environments
- Planning for improved lactation space capacity and outfitting in new buildings
- Outfitting of lactation rooms with recommended criteria where possible
- Improved cleaning of existing rooms
- Improved communication of existing resources (existing room locations, reservation systems, where to get free cooler bags, where to get pump parts)
- Local cultural efforts to support those who are breastfeeding

#### Next Steps

A follow up report will follow outlining our assessment and further proposed solutions. We recognize these problems may impact staff and learners differently, in ways not accounted for here, and additional partnership with those groups will continue in order to improve the lactation support and conditions for all at UCSF Health.

#### Recognitions

Special thanks to Dr. Michelle Mourad who led the proposal and championing of this work which has led to these improvements to date.

Thanks to Bess Wildman for supporting the financial analysis and Dr. Katie Grouse for the APeX pieces needed to make this work.

Thanks also to all the committee members of Faculty Practice Advisory Committee who believed in the importance and prioritization of this work and the equity implications despite our uncertain financial times.

*For additional information, please find attached FAQs and an APeX Lactation Hold Tip Sheet.*

*With any additional questions about this lactation credit program, please contact*

*[Michelle.Mourad@ucsf.edu](mailto:Michelle.Mourad@ucsf.edu)*

*With any questions about the UCSF Lactation Accommodation Program, please contact*

*[lactationprogram@ucsf.edu](mailto:lactationprogram@ucsf.edu) or visit their website at <https://tiny.UCSF.edu/UCSFpump>.*

Sincerely,

Diane Sliwka, MD

Pronouns: She, Her, Hers

Chief Physician Experience Officer, UCSF Health

Professor of Medicine, Division of Hospital Medicine, UCSF

Michelle Mourad, MD

Professor and Vice Chair of Clinical Affairs and Value, Department of Medicine

Medical Director, Transitions in Care, UCSF Health

Josh Adler, MD  
Chief Clinical Officer, UCSF Health  
Vice Dean, Clinical Affairs, UCSF School of Medicine

Susan Smith, MD  
Chief Faculty Practices Officer  
Senior Vice President of UCSF Health

Dave Morgan  
Executive Director, Ambulatory Services at UCSF Medical Center

## Appendix D

### [SAMPLE PROGRAM TEMPLATE]

### Lactation Accommodation During Residency or Fellowship Training

#### [Program Name]

#### UCSF School of Medicine

If you anticipate requesting lactation support upon return from parental leave, please review information about institutional resources for lactation support as well as options for protected time for pumping support on clinical rotations.

#### Information about available spaces for pumping, access, and contact information:

- UCSF Lactation Accommodation Program website for information on locations of lactation rooms, how to register for the Lactation Accommodation Program, and how to obtain a free cooler bag: <http://tiny.ucsf.edu/lactationrooms>
- *[add additional information about department-specific spaces, as applicable]*
- Contact information:
  - To report issues or seek help with facilities/room concerns, access, functionality: Caroline Wick, UCSF Lactation Program Coordinator [caroline.wick@ucsf.edu](mailto:caroline.wick@ucsf.edu)
  - To obtain help with persistent issues or unresolved concerns GME: Amy Day Rossa, Director of GME, [amy.dayrossa@ucsf.edu](mailto:amy.dayrossa@ucsf.edu)

**Options for protected time for pumping** *[modify as applicable]*: A reasonable amount of time for a lactation break is generally 30 minutes every 2-4 hours, which includes the time associated with travel to and from the lactation space, expressing milk, clean up, and storage. If additional break time and accommodations are needed beyond required and recommended provisions, please contact [Disability-Management Services](#)

- **Inpatient-procedural:** one 30-minute slot between cases every 2-4 hours
- **Inpatient-non-procedural:** one 30-minute slot free from direct patient care responsibilities every 2-4 hours
- **Ambulatory:** two consecutive 15 minute clinic slots blocked out each half day clinic session
- **Didactics:** Ability to leave didactics for 30 minutes every 2-4 hours as needed, ideally with option to join remotely if desired.
- **Research:** Ability to leave for 30 minutes every 2-4 hours as needed, ideally with option to join remotely if desired.

**Notification of supervisors about lactation accommodations:** the designated program point person can contact clinical supervisors/rotation directors to make them aware of *[resident/fellow]* protected time for pumping. Trainees can also contact their supervisors directly if they prefer.

**Duration of accommodation:** Lactation accommodations are provided for each trainee until the trainee's child is one year old. After that time, additional accommodations can be discussed on a case-by-case basis with UCSF Disability Management Services: [Disability-Management Services](#)

**Additional scheduling accommodations:** Trainees who require additional schedule modifications after returning from parental leave can request formal accommodations from UCSF Disability Management Services at [Disability-Management Services](#)