ABP Corporate Policy
Absences from Training Policy- Parental/Medical/Caregiver Leave

Read the Absence from Training: Details and Frequently Asked Questions

In order to meet the training requirements to apply for certification by the ABP, an individual must train in a program accredited by the Accreditation Council for Graduate Medical Education (ACGME) in the United States or the Royal College of Physicians and Surgeons of Canada (RCPSC), and the program director must verify that the individual has successfully met the training requirements.

The duration of accredited training as required by the ACGME or RCPSC varies by pathway. For general pediatrics categorical residency and most core pediatric fellowship training, it is 36 months. All pathways, though, allow for one month of absence each year for time away from training which can be used for vacation, illness, or family leave.

Consistent with our long-standing policy, individuals in three-year core training programs are allowed up to a total of eight weeks of additional parental, medical, or caregiver leave once over their training period. Similarly, effective July 1, 2021, individuals in nonstandard* and combined** pathways will be allowed up to a total of six weeks of additional parental, medical, or caregiver leave once over their training period. The additional leave time is over the entire duration of training and is not allocated annually.

The total amount of leave time offered to the trainee is at the discretion of the institution. Programs have the flexibility to grant longer periods of leave time, but training must be extended to make up for any absences greater than what is allowed by the policy for vacation, parental, medical, or caregiver leave for a given residency or fellowship pathway. Trainees who experience an interruption in residency for greater than 24 continuous months or in fellowship for greater than 12 continuous months and who wish to re-enter training must petition the ABP to determine whether credit may be awarded for prior training. To qualify for the additional absence from training, outside of the standard one month per year, all of the following requirements must be met for an individual trainee:

- The absence is due to parental, medical, or caregiver leave;
- The trainee is deemed competent by the Program Director and Clinical Competency Committee;
- All training requirements must be met except for elective training or research time as determined by the pathway; and
- The scholarly activity requirement must be met if the trainee is a fellow.

The ABP encourages trainees to take yearly vacation and strongly discourages “banking” vacation from year to year as it can negatively affect trainees’ health and well-being. The ABP views educational leave, which includes attendance at training-related seminars, as bona fide educational experiences, and it need not be counted as time away from training. All trainees must have satisfactory performance in all core domains of competence to complete their training. In addition, trainees must complete all required experiences as outlined by the training pathway.
The ABP recognizes that leave policies vary from institution to institution and expects the program director to apply local requirements within these guidelines to ensure trainees have completed the requisite training period. This policy applies to ABP eligibility requirements for initial certification and does not supersede institutional or program policies and applicable laws.

The revised ABP policy will be effective July 2021 and affect trainees who graduate in 2022 or later.

*Nonstandard pathways include:
  - Pediatrics-Neurology
  - Pediatrics-Neurodevelopmental Disabilities
  - Waiver of Accredited Training due to prior non-accredited pediatric training
  - Non-Pediatric Credited Training
  - Accelerated Research Pathway (ARP)
  - Combined Adult and Pediatric Subspecialty Fellowship
  - Dual Integrated Pediatric Subspecialty Fellowship
  - The second subspecialty fellowship of Dual Sequential Subspecialty Fellowship
  - Subspecialty Fasttracking

**Combined pathways at this time include Medicine-Pediatrics, Pediatrics-Medical Genetics, and Pediatrics-Psychiatry/Child and Adolescent Psychiatry. The policy for Pediatrics-Emergency Medicine, Pediatrics-Anesthesiology, and Pediatrics-Physical Medicine and Rehabilitation is under review and will be determined at a later date.