

FACULTY DEVELOPMENT: *Overview of the New ACGME Duty Hour Regulations*

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I. The ACGME has revised the duty hour rules which will take effect July 2011. The new standards are designed to accomplish three goals:

1. To assure the safety and quality of care rendered to patients in our teaching hospitals today;
2. To assure the safety and quality of care rendered to patients of our current residents in their future independent clinical practice; and
3. To assure the provision of a safe and humanistic educational environment for our residents to learn and demonstrate professionalism and effacement of self interest.

II. Comparison of Current ACGME Duty Hour Standards to New Regulations

	Current	2011
Maximum hours of work per week	80 hours, averaged over 4 wks	No change
Maximum Duty Period Length	30 hours (admitting patients up to 24 hours then 6 additional hours for transitional and educational activities)	<ul style="list-style-type: none"> • PGY-2 and above: 28 hrs (admitting patients for up to 24 hrs, plus 4-hr remaining hrs for transition and educational activities) • PGY-1 : 16 hrs
Maximum in-hospital on-call frequency	Every third night, on average	Every third night, no averaging
Minimum time off between scheduled duty periods	10 hours after shift length	<ul style="list-style-type: none"> • PGY-1 should have 10 hrs; must have 8 hrs • Intermediate-level should have 10hrs; must have 8 hrs. Must have 14 hrs after 24 hrs on in-house duty • Final years: exceptions made by RRC
Maximum frequency of in-hospital night float	Not addressed	<ul style="list-style-type: none"> • 6 consecutive nights
Mandatory time off duty	<ul style="list-style-type: none"> • 4 days off per month • 1 day (24 hours) off per week, averaged over 4 weeks 	<ul style="list-style-type: none"> • Same

III. Consequences of Long Resident Work Hours: Summary of a Few Studies

- 109% more attentional failures at night > 16 hours¹
- 36% more serious medical errors working 30-h shifts²
- 464% more serious diagnostic errors in the ICU²
- 168% more car crashes commuting after >24-h³ shifts
- 468% more near-miss car crashes³
- 73% greater risk of needle stick or scalpel lacerations after >20 consecutive hours at work⁴

1. Lockley SW et al. *N Engl J Med* 2004;351:1829-1837. 2. Landrigan CP, et al. *N Engl J Med* 2004;351:1838-1848. 3. Barger LK, et al. *N Engl J Med* 2005;352:125-134. 4. Ayas NT, et al. *JAMA* 2006;296:1055-1062.

IV. Residents and faculty members should understand and accept their personal role in the recognition of impairment, including illness and fatigue, in themselves and in their peers.