

# The Media Response to the ACGME's 2017 Relaxed Resident Duty-Hour Restrictions

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## Abstract

**Purpose:** In March 2017, the ACGME relaxed resident duty-hour restrictions to allow first-year residents to work 24-hour shifts, affecting the internship experience of incoming radiology residents. The aim of this study was to assess the media response to this duty-hour change, comparing news articles with favorable and unfavorable views.

**Methods:** Google News was used to identify 36 relevant unique news articles published over a 4-week period after the announcement. Articles' stance was categorized as favorable, unfavorable, or neutral. Additional article characteristics were explored.

**Results:** Article sources were 58% national, 22% local, and 20% medical news. Article stance was most commonly unfavorable for national news sources (48%), compared with neutral for local (62%) and medical (72%) news sources. Most common reasons for unfavorable stance were sleep deprivation (n = 11), medical errors (n = 11), residents' health (n = 9), risk for car accidents (n = 9), a patriarchal hazing system (n = 6), and work-life balance (n = 5). Most common reasons for favorable stance were impact on resident education (n = 7) and continuity of care (n = 7). Supporting data were cited by 38% of unfavorable and 100% of favorable articles. Unfavorable articles most commonly quoted physicians affiliated with resident advocacy groups; favorable articles most commonly quoted physicians affiliated with the ACGME.

**Conclusions:** The relaxed duty-hour restrictions received an overall unfavorable media response, particularly in nonmedical news sources, driven by concerns regarding sleep-deprived doctors. Favorable articles ubiquitously cited data supporting the safety of relaxed duty hour restrictions. Further research is warranted to better understand the impact of relaxed resident duty-hour limits on sleep deprivation, residents' health and education, and the quality of patient care.

**Key Words:** Education, residents, interns, ACGME, patient safety

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## INTRODUCTION

On March 10, 2017, the ACGME relaxed resident duty-hour restrictions to allow first-year residents to work shifts lasting up to 24 hours, with up to an additional 4 hours for care transition, starting in July 2017 [1]. This updated policy stands to greatly influence the internship experience, including for incoming radiology residents. As further background, the ACGME in 2003 limited resident duty hours to 80 hours per week, capped the

length of overnight shifts, and mandated a minimum amount of time off between shifts [2]. Furthermore, in 2011, the ACGME shortened interns' maximum shift length to 16 hours and increased the time off after overnight on-call duties for interns and intermediate-level residents [2]. Thus, the revised 2017 requirements represent the first time in recent years that the ACGME has in fact relaxed earlier resident work-hour restrictions. (Nonetheless, the update preserved earlier requirements regarding a maximum of 80 hours per week, 1 day per week free from clinical and educational activities, and in-house call no more frequent than every third night averaged over 4 weeks.) The ACGME indicates that the revised requirements are intended to promote patient safety as well as resident and fellow well-being, while allowing programs and residents more discretion to structure clinical education [1].

Despite numerous studies [3-11], the impact of resident duty-hour restrictions on patients and residents remains unclear. Of note, systematic reviews have

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Table 1. Representative studies evaluating the impact of resident duty-hour restrictions referenced by news articles identified by Google News search

Trial	Full Name	Year	Journal	Cohort	Study Design	Study Population	Key Finding
	Intern Sleep and Patient Safety study [11]	2004	<i>New England Journal of Medicine</i>	Intensive care unit interns	Randomized trial	Interns of the medical intensive care unit and coronary care unit of Brigham and Women's Hospital	Interns made substantially more serious medical errors when they worked frequent shifts of 24 h or more than when they worked shorter shifts.
FIRST	Flexibility in Duty Hour Requirements for Surgical Trainees [18]	2016	<i>New England Journal of Medicine</i>	Surgery interns	Cluster-randomized trial	Interns of 118 eligible ACGME-accredited general surgery residency programs	Less restrictive duty-hour policies were associated with noninferior patient outcomes and no significant difference in residents' satisfaction with their overall well-being and quality of education.
iCOMPARE	Individualized Comparative Effectiveness of Models Optimizing Patient Safety and Resident Education [19]	Ongoing		Medicine interns	Cluster-randomized trial	Interns of 63 ACGME-accredited internal medicine residency programs	Ongoing

variably determined that the impact of resident duty-hour restrictions on improving patient outcomes, resident education, and resident well-being may be favorable, unfavorable, neither, or inconclusive [12-17]. To better address the issue, randomized trials of duty-hour flexibility during internship have been developed (Table 1), including the Flexibility in Duty Hour Requirements for Surgical Trainees (FIRST) trial [18], the Individualized Comparative Effectiveness of Models Optimizing Patient Safety and Resident Education (iCOMPARE) trial [19], and the Intern Sleep and Patient Safety Study [11]. Nonetheless, this issue remains controversial.

The ACGME resident duty-hour policies have received considerable public interest, with many popular media outlets covering the policy updates and providing an outlet for public stakeholder debate [20-22]. Investigation of the content of such media coverage may give insights into how the public perceives the matter, for example which aspects of the multifaceted debate are of greatest public concern and importance. Thus, the aim of our study was to assess the media response to the ACGME's 2017 relaxation of resident duty-hour restrictions, focusing on the frequency and reasons for favorable versus unfavorable responses.

## METHODS

This study did not constitute human subject research and thus did not require local institutional review board approval.

We used Google News [23] to identify news articles published over a 4-week period after the March 10, 2017, ACGME announcement of its revised duty-hour policy. The search was conducted on April 8, 2017, and was limited to news articles published in English within the United States. Google News allows searching historic content from thousands of news websites, with results sorted by relevance and popularity, comparable with Google's primary search engine [23]. Google News has been used to evaluate the public interest in, and reaction to, various medical topics [24,25], including topics related to diagnostic radiology [26].

A series of three separate Google News searches were performed for the following phrases: "resident hour," "resident duty hour," and "ACGME resident hour." All unique articles identified from these searches were combined. Article sources were recorded and categorized as national news (eg, Huffington Post), local news

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