

Honorable Mention

Night Float at the University of Virginia's Surgery Program: Ensuring Educational Benefit

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Introduction: The ACGME mandated a change in resident work hours effective July 2003. We studied a number of call schedule options and chose to use the night float (NF) model for PGY1 residents. There are no data to support the educational benefit of one system over another but we postulated that taking a block of night call would provide an opportunity for first year residents to develop diagnostic skills and improve clinical decision-making, without detracting from operative experience

Methods: The educational benefit of the night float model was evaluated weekly beginning in July 2003 by anonymous questionnaire assessing resident conference attendance, operative experience, attending teaching interactions, consult and overall clinical experience for the previous seven days. IRB approval was obtained.

Results: When the preliminary results were evaluated at the end of July (Figure 1) it was apparent that a higher percentage of PGY1 night floats reported LESS satisfaction in terms of conference attendance, operative experience, and attending teaching interactions than their daytime colleagues. These data were of such concern that a number of interventions were made immediately to increase faculty awareness of the need to improve the educational experience. As a result, when the data for August and September were compared with the data for July the night float residents in August/September reported an improvement compared with the July night floats (Figure 1) Compliance with the 80hour week was equal for both groups

Conclusions: The night float model has the advantage of fulfilling ACGME requirements, reducing excessive cross-cover and providing continuity of patient care at night. However it has the potential to limit the resident's operative experience and didactic teaching. Continued monitoring and faculty intervention is critical if we are to succeed in our goal to provide our residents with the best possible educational experience.

Percentage of PGY1 Residents With **LEAST**
Educational Experience (Fig1)

