



**Accreditation Council for
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ACGME Clarifies Misperceptions on Duty Hour Standards

ACGME committed to rigorous monitoring and enforcement of standards regulating resident duty hours

CHICAGO, April 21, 2004 - In February 2003, the ACGME approved new maximum duty hours standards applicable to its accredited residency programs effective July 1, 2003. These standards resulted from a comprehensive process that included conversations with and input from residency program directors, residents, faculty and other stakeholders in graduate medical education. Public comment was sought and received on the proposed standards.

An April 6, 2004 American Medical Student Association news release implied that the ACGME was planning to change the maximum weekly duty hour limits for all residents. That is incorrect. At the ACGME's February 2004 meeting, the chairs of several surgical residency review committees requested flexibility for the duty hour limits for the small number of residents who are chief surgical residents (physicians in the final year of training). The ACGME denied the request and directed the duty hours subcommittee to study the implications of such a change on the quality of

patient care, continuity of care, resident well-being, and the volume of procedures that surgical residents are expected to complete in order to become surgeons in independent practice.

The ACGME does not intend to increase its maximum duty hour standards for all residents, as AMSA implied. In fact, some specialties have adopted duty hour standards that are more restrictive than the common duty hour standards and best reflect the patient care and educational demands for those specialties. As of January 2004, less than one percent of the 7,900 ACGME-accredited programs had applied for the eight-hour weekly increase in duty hours, which the standards permit on a program-by-program basis. Fifty-three programs (30 in neurosurgery) were granted the increase; 17 programs were denied the request.

The common duty hour standards include these provisions:

- An 80-hour weekly limit, averaged over four weeks.
- An adequate rest period, which should consist of 10 hours of rest between duty periods.
- A 24-hour limit on continuous duty, with up to six added hours for continuity of care and education.
- One day in seven free from patient care and educational obligations, averaged over four weeks.
- In-house call no more than once every three nights, averaged over four weeks.
- Programs can request an increase of up to 8 hours in the weekly hours, if this benefits resident education and is approved by the sponsoring institution and the ACGME residency review committee for the particular specialty.

The ACGME is committed to good learning for good health care. Since July 2003 the ACGME has been gathering data on the implementation and impact of the duty hour standards, and has been carefully monitoring program compliance, issuing citations and taking adverse actions against programs to ensure compliance with the standards.

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The ACGME is a private non-profit council that accredits 7,900 residency programs in 27 specialties educating 100,000 residents. Its mission is to improve the quality of health care in the United States by ensuring and improving the quality of graduate medical education for physicians in training.