New doctors will be allowed to work 24-hour shifts

First-year doctors will be allowed to work 24-hour shifts in hospitals across the United States starting July 1, when a much-debated cap that limits the physicians to 16 consecutive hours of patient care is lifted, the organization that oversees their training announced Friday.

The Accreditation Council for Graduate Medical Education said the change will enhance patient safety because there will be fewer handoffs from doctor to doctor. It also said the longer shifts will improve the new doctors’ training by allowing them to follow their patients for extended periods, especially in the critical hours after admission.

The controversial decision ends the latest phase in a decades-old discussion over how to balance physician training with the safety and needs of patients whose care is sometimes handled by young, sleep-deprived doctors — a practice that a consumer group and a medical students’ organization oppose as dangerous. The council said Friday that under the amended standards, the physicians’ mental and physical health actually will be bolstered by requiring their supervisors to more closely monitor their well-being.

Those standards will allow four hours to transition patients from one doctor to the next, so first-year residents could work as long as 28 straight hours, the same as more senior medical residents. The 125,000 doctors in training, known as “residents” and “fellows” depending on how many years they’ve completed, are the backbone of staffs at about 800 hospitals across the country.

“What we want is to be able to say at the end of residency that we have a physician who is highly trained and is ready to go out into practice,” said Rowen K. Zetterman, co-chairman of a task force that spent two years looking into the issue. Zetterman noted that many doctors work 65 to 70 hours a week for much of their careers.

Following a study of patient safety and work rules by the Institute of Medicine, the accreditation council imposed the cap on first-year residents’ hours in 2011 and banned 30-hour shifts that some residents had been working. A later study of surgical trainees showed that many young physicians are willing to work longer shifts to hone their knowledge and skills and that the extra hours do not affect patient outcomes.

But one consumer group, which has opposed lifting the cap every step of the way, rejected the rationale for Friday’s announcement. Michael Carome, a doctor who heads Public Citizen’s health research group, called the move “a dangerous step backwards.”

“We know from extensive research, multiple studies, that sleep-deprived residents are a danger to themselves, their patients and the public,” Carome said. Sleep-deprived residents are at greater risk of car accidents, needle-stick injuries and depression, the organization contends. In recent years, the medical profession has acknowledged the high rate of burnout and depression among physicians overall.
A poll commissioned by Public Citizen last July found that 86 percent of respondents opposed the longer hours for first-year residents. Eighty percent wanted more senior colleagues to work shorter shifts as well.

— by Lenny Bernstein for The Washington Post

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