

## National cluster-randomized trial of duty-hour flexibility in surgical training.

February 14, 2017

Bilimoria KY, Chung JW, Hedges L, et al. National Cluster-Randomized Trial of Duty-Hour Flexibility in Surgical Training. *New Engl J Med.* 2016;374(8):713-727. doi:10.1056/NEJMoa1515724.

<https://psnet.ahrq.gov/issue/national-cluster-randomized-trial-duty-hour-flexibility-surgical-training>

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Resident physician [duty hour](#) policies have generated rigorous [debate](#), particularly following the most recent [ACGME](#) changes implemented in [2011](#), which shortened maximum shift lengths for interns and increased time off between shifts. This national study cluster-randomized 118 general surgery residency programs to adhere to current ACGME duty hour policies or to abide by more flexible rules that essentially followed the prior standard of a maximum 80-hour work week. Between these two groups, there were no significant differences in patient outcomes, including death and serious complications. Residents reported similar levels of satisfaction with their overall education quality and their well-being. An accompanying editorial notes that the study authors interpret these results as supporting flexible work-hour rules. Alternatively, the editorial author suggests that this study refutes concerns that the new policy compromises patient safety, and as such there is no compelling reason to backtrack on its implementation.