

THE NYU SCHOOL OF MEDICINE  
DUTY HOURS POLICY FOR RESIDENTS

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Revised/Effective: 10/27/03  
Reviewed: 10/27/03  
Supersedes: 6/10/03  
Originally adopted: 6/10/03  
Approved by: Graduate Medical Education Committee  
Web address: <http://www.med.nyu.edu/housestaff/PDguide/public/DutyHours.htm>  
Applies to: Residents enrolled in ACGME-accredited specialty and sub-specialty programs

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## **I. Preamble**

New York State has longstanding regulations restricting Resident Duty Hours. Effective July 1, 2003, the Accreditation Council for Graduate Medical Education ("ACGME") adopted similar Duty Hour limitations.

In its policy requirements, the ACGME states that "providing Residents with a sound academic and clinical education must be carefully planned and balanced with concerns for patient safety and Resident well-being. Each program must ensure that the learning objectives of the program are not compromised by excessive reliance on Residents to fulfill service obligations. Didactic and clinical education must have priority in the allotment of Residents' time and energies. Duty Hour assignments must recognize that faculty and Residents collectively have responsibility for the safety and welfare of patients."

In this document, all references to Residents are limited to trainees in ACGME-accredited specialty and sub-specialty programs.

## **II. Definitions**

A. ACGME - Accreditation Council for Graduate Medical Education

B. Call

- At-Home Call (or pager call) is call taken from outside the assigned institution;
- In-House Call is comprised of Duty Hours beyond the normal workday, when Residents are required to be immediately available in the assigned institution.

C. Director - Director of Residency Training

D. Duty Hours - Include all clinical and academic activities of the Resident; i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, transfer of patient care, time spent in-house on-call, scheduled academic activities such as conferences, and any moonlighting activities. Duty Hours do not include reading and preparation time spent away from the duty site.

E. NYU - New York University School of Medicine

### **III. Policy**

A. Regulations. New York Codes, Rules and Regulations (NYCRR), Title 10, Section 504.4, and ACGME Final Requirements, "Resident Duty Hours Language," promulgate Duty Hour restrictions in order that the working conditions and hours of Residents promote the provision of quality medical care. The regulations establish the following limits on Resident Duty Hours:

#### 1. Duty Hour Limitations.

- a. Assignment of Residents shall be limited to no more than 12 consecutive Duty Hours per on-duty assignment in the Emergency Medicine Department.
- b. The scheduled workweek shall not exceed an average of 80 Duty Hours per week, averaged over a 4-week period, inclusive of all In-House Call.
- c. Continuous on-site duty, including In-House Call, must not exceed 24 consecutive Duty Hours. Residents may remain on duty for up to 3 additional hours to participate in didactic activities, transfer care of patients, conduct outpatient clinics, and maintain continuity of medical and surgical care, as defined in Specialty and Subspecialty Program Requirements.
- d. Adequate time for rest and personal activities must be provided to Residents. In determining limits on Resident Duty Hours, as set forth in subparagraphs (a) and (b) of this paragraph, the Director of Residency Training ("Director") shall require that scheduled on-duty assignments be separated by not less than 8 non-Duty Hours. Residents shall have at least one 24-hour period free from all clinical, educational, and administrative activities per week.

2. Prohibition. Residents who have worked the maximum number of Duty Hours permitted in subparagraphs (a) through (d) of this paragraph shall be prohibited from working additional hours as physicians providing professional patient care services.

3. Exceptions. The Graduate Medical Education Committee will neither entertain nor endorse requests for exceptions to this policy

B. Additional Restrictions. In addition, the ACGME also requires:

1. Supervision of Residents.

- a. All patient care must be supervised by qualified faculty. The Director must ensure, direct, and document adequate supervision of Residents at all times. Residents must be provided with rapid, reliable systems for communicating with supervising faculty.
- b. Faculty schedules must be structured to provide Residents with continuous supervision and consultation.
- c. Faculty and Residents must be educated to recognize the signs of fatigue and adopt and apply policies to prevent and counteract the potential negative effects.

2. On-Call Activities. The objective of on-call activities is to provide Residents with continuity of patient care experiences throughout a 24-hour period.

- a. In-House Call must occur no more frequently than every third night, averaged over a 4-week period.
- b. No new patients, as defined in Specialty and Subspecialty Program Requirements, may be accepted after 24 hours of continuous duty.
- c. The frequency of At-Home Call is not subject to the every-third-night limitation. However, At-Home Call must not be so frequent as to preclude rest and reasonable personal time for each Resident. Residents taking At-Home Call must be provided with 1 day in 7 completely free from all educational and clinical responsibilities.
- d. When Residents are called into the hospital from home, the hours the Residents spend in-house are counted toward the 80-Duty Hour limit, as established under Section III.A.1.b., Policy, of this document.
- e. The Director must monitor the demands of At-Home Call in his/her program and make scheduling adjustments as necessary to mitigate excessive service demands and/or fatigue on his/her Residents.

3. Oversight.

- a. Each program must have written procedures consistent with this Duty Hours Policy for Residents. This policy and the written department procedures must be distributed to Residents and faculty. Monitoring of Duty Hours is required with frequency sufficient to ensure compliance and an appropriate balance between education and service.
- b. Back-up support systems must be provided when patient care responsibilities are unusually difficult or prolonged, or if unexpected circumstances create Resident fatigue sufficient to jeopardize patient care.

#### **IV. Violation and Disciplinary Action**

A. Violation of Duty Hour Limitations. Noncompliance with NYCRR, Title 10, Section 405.4, is a breach of policy that could jeopardize the accreditation status of the Resident's program and subject NYU to considerable financial penalties.

B. Disciplinary Action. Refer to the NYU Evaluation, Corrective Action, and Disciplinary Policy for Residents for relevant disciplinary action policy and procedure.