

# Report discusses impact of ACGME 2011 requirements

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(HealthDay)—Although many residency program directors approve of individual components within the Accreditation Council for Graduate Medical Education (ACGME) Common Program Requirements introduced in 2011, less than half express overall approval, according to a perspective piece published in the Feb. 21 issue of the *New England Journal of Medicine*.

Brian C. Drolet, M.D., from Rhode Island Hospital in Providence, and colleagues surveyed over 500 residency program directors one year after

implementation of the ACGME requirements.

The researchers found that 46.7 percent of program directors expressed overall approval of the requirements. Nearly all components were supported by a large majority of directors, with the exception of duty-period limits, with less than half (48.0 percent) in favor of restriction of senior residents' shifts to 24 hours and 71.6 percent against the 16-hour intern shift limit. Most [respondents](#) reported that there was no change in many aspects of training and care, including resident supervision, [patient safety](#), and fatigue. Nearly half of respondents reported an improvement in perceived quality of life for residents, while the requirements were reported to have a negative effect on resident education and preparedness of senior roles. Most respondents reported that their workload and utilization of physicians' extenders had increased. The impact of the 16-hour shift limit did not result in [interns](#) being less fatigued or working fewer hours.

"We believe that individual residency-review committees should develop rules to ensure that graduated responsibility is afforded in a safe and specialty-specific manner, while improving residents' education and quality of life as well as patient care," the authors write.

**More information:** [Full Text](#)

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