Patient safety not affected by resident hour reforms

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(HealthDay)—In the year following 2011 work-hour reforms for residents there were no changes in patient safety outcomes when comparing patients treated by residents to those treated by hospitalists, according to a study published online Feb. 22 in the *Journal of Hospital Medicine*.

Lauren Block, M.D., from the Hofstra North Shore-LIJ School of Medicine in Lake Success, N.Y., and colleagues evaluated whether safety outcomes improved among patients discharged from resident and hospitalist services (general medicine) before (2008 to 2011) and after (2011 to 2012) 2011 reforms to residency work-hours.

The researchers found that patients discharged from the resident services

in the postreform period had higher likelihood of an [intensive care unit](#) stay (5.7 versus 4.5 percent; 95 percent confidence interval, 0.5 to 2.2 percent) and lower likelihood of 30-day readmission (17.2 versus 20.1 percent; 95 percent confidence interval, 1.3 to 4.3 percent), compared to patients discharged from the resident services in the prereform period. There were no significant differences in patient safety outcomes between pre- and postreform periods on the resident and hospitalist services.

"In the first year after implementation of the 2011 work-hour reforms relative to prior years, we found no change in [patient safety](#) outcomes in patients treated by residents compared with [patients](#) treated by hospitalists," the authors write.

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