

**WALKING UPHILL BOTH WAYS IN THE SNOW TO SCHOOL: THE IMPACT OF RESIDENT WORK HOUR RESTRICTIONS ON FACULTY**

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**Background:** In July 2003, the ACGME instituted mandatory resident work hour restrictions (RWHR). While in opinion surveys surgeons believe their workhours have increased with RWHR, the impact on actual faculty workhours has not been objectively studied.

**Hypothesis:** Self-reported faculty work hours have increased since implementation of RWHR.

**Design:** Retrospective analysis of existing database of faculty self-reported projected workhours.

**Setting:** Academic Medical Center

**Methods:** Faculty activity surveys have been used at our institution as a method to report time devoted clinical, research, and teaching roles. We used these self-reported faculty activity surveys for two reporting periods before (2001, 2003) and two reporting periods after (2005, 2007) RWHR implementation. We analyzed the data using random intercept linear regression models to compare pre and post RWHR hours worked per week for the major clinical departments.

**Results:** The total hours worked per week remained constant at 60 hours (median) for all faculty in all time periods. Surgeons reported medians of 63 and 65 hours/week pre and 65 and 65 hours/week post RWHR. Pediatricians and internists reported a median of 60 hours/week for all time periods. When mean hours/week were analyzed, the only significant difference was a decrease after RWHR reported by internal medicine faculty (62.5 vs 57.6,  $p < 0.01$ ). There were no differences between women and men faculty in mean or median reported hours/week in any time period.

**Conclusions:** Although faculty perceive their workhours have increased as a result of resident workhours restrictions, the self-reported median hours per week have not changed when comparing pre and post RWHR time periods.