

## **DOES NIGHT FLOAT IMPACT THE QUALITY OF THE ADMIT HISTORY AND PHYSICAL?**

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**Purpose:** National mandate for an eighty-hour resident physician work week has required nearly all medicine programs to adopt a “night float” system. Little is known, however, regarding the impact of “night float” on patient care. This study assesses the difference, if any, in history and physical exam (H&P) quality between residents on night float (NF) versus non-night float (non-NF) patient service rotations.

**Methodology:** Eligible H&Ps were those with the principal discharge diagnosis of pneumonia or COPD (chronic obstructive pulmonary disease) completed by an internal medicine resident between July 2002 and June 2003 at a university internal medicine residency program. A criteria checklist for each diagnosis that assessed H&P quality was created utilizing consensus opinion of five attending physicians. These checklists allowed comparison of five quality variables (written length as well as documentation of pertinent medication, history, exam, and laboratory data) between the H&Ps completed during NF vs. non-NF rotations. Reviewers were blinded to patient and physician identifiers. Mann-Whitney U statistics were employed.

**Summary:** Seventy-nine patient records (21 COPD, 58 pneumonia) met criteria and all were reviewed. Fifty-two records reflected non-NF while 27 reflected NF duty. Agreement amongst reviewers was excellent ( Kruskal-Wallis,  $p=0.87$  to  $p=0.97$ ). No significant difference in H&P quality was found between NF and non-NF service assignment for any of the five quality indicators studied.

**Conclusions:** Increased “night float” utilization necessitates increased transfer of patient care information between physicians. As such, written H&P quality is ever more important in assuring a smooth transition of care between providers. Our finding that the quality of resident H&Ps did not differ between NF and non-NF services is encouraging and prompts further research into this timely and nationally pertinent issue.

