



NEWS RELEASE

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Correlation between physician task load and risk of burnout

Study in February 2021 issue of The Joint Commission Journal on Quality and Patient Safety

(OAKBROOK TERRACE, Illinois, January 28, 2020) – The complexity of health care is increasing at a rapid pace and directly affects the day-to-day work of physicians as they care for patients. In addition to mounting complexity, the administrative and cognitive burdens on physicians may contribute to an increased risk of physician burnout.

A new study in the February 2021 issue of *The Joint Commission Journal on Quality and Patient Safety*, “[Physician Task Load and the Risk of Burnout Among U.S. Physicians in a National Survey](#),” evaluated whether task load correlated with burnout scores in a large national study of U.S. physicians between October 2017 and March 2018.

Task load was measured by the National Aeronautics and Space Administration (NASA) Task Load Index (TLX). The NASA-TLX was chosen to evaluate physician task load (PTL) due to its robust validation and use across many industries, including health care, over the past 30 years. The domains in the PTL were mental, physical and temporal demands, and perception of effort. Burnout was measured using the Emotional Exhaustion and Depersonalization scales of the Maslach Burnout Inventory, and a high score on either scale was considered a manifestation of professional burnout.

Findings showed the mean PTL score, varying by specialty, was 260.9/400. Specialties with the highest PTL scores were emergency medicine, urology, anesthesiology, general surgery subspecialties, radiology and internal medicine subspecialties. Researchers also found the most common reported symptoms of burnout included high emotional exhaustion (38.8%) and depersonalization (27.4%). At least one symptom of burnout was reported in 44% of respondents.

A significant association was found between PTL and burnout. For every 40-point (10%) decrease in PTL, there was 33% lower odds of experiencing burnout. The researchers conclude that the strong association between PTL and burnout may provide a framework to approach the practice environment and reduce burnout.

“Cognitive load was rapidly increasing in health care prior to the COVID-19 pandemic, which has accelerated strain on an already overloaded system,” says Elizabeth Harry, MD, the study’s corresponding author and senior director of clinical affairs at University of Colorado Hospital, as well as associate professor of internal medicine at University of Colorado School of Medicine. “Attention to the risk of burnout associated with task load is more critical today than ever before and offers health care systems a measurable target for systemic improvement initiatives.”

“Determining how to best unburden cognitive load may require collaboration with experts in operational and implementation science,” adds an [accompanying editorial](#) by Jonathan Ripp, MD, MPH. “Health care institutions will need to prioritize capturing metrics that shed a light on ‘hot spot’ high cognitive load areas within a system where appropriate interventions should be directed.”

Also featured in the February issue:

- [A Program to Provide Clinicians with Feedback on Their Diagnostic Performance in a Learning Health System](#) (Geisinger, Danville, Pennsylvania)
- [Feedback on Missed and Delayed Diagnosis: Differential Diagnosis of Communication Dilemmas](#) (editorial)
- [Virtual Urgent Care Quality and Safety in the Time of Coronavirus](#) (NYU Langone Health, New York City)
- [A Multi-Modal Intervention to Improve the Quality and Safety of Inter-Hospital Care Transitions for Nontraumatic Intracerebral and Subarachnoid Hemorrhage](#) (Yale School of Medicine, New Haven, Connecticut)
- [Diabetes to Go-Inpatient: Pragmatic Lessons Learned from Implementation of Technology-Enabled Diabetes Survival Skills Education Within Nursing Unit Workflow in an Urban, Tertiary Care Hospital](#) (MedStar Health, Washington, D.C.)
- [Communication Tools to Support Advance Care Planning and Hospital Care During the COVID-19 Pandemic: A Design Process](#) (Ariadne Labs, Boston)
- [Resident-Driven Procedure Team and Speed of Obtaining Diagnostic Paracentesis](#) (University of Rochester, Rochester, New York)

For more information, visit [The Joint Commission Journal on Quality and Patient Safety website](#).

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Note for editors

The article is “[Physician Task Load and the Risk of Burnout Among U.S. Physicians in a National Survey](#)” by Elizabeth Harry, MD; Christine Sinsky, MD; Lotte N. Dyrbye, MD, MHPE; Maryam S. Makowski, PhD; Mickey Trockel, MD, PhD; Michael Tutty, PhD; Lindsey E. Carlasare, MBA; Colin P. West, MD, PhD; and Tait D. Shanafelt, MD. The article appears in *The Joint Commission Journal on Quality and Patient Safety*, volume 47, number 2 (February 2021), published by Elsevier.

The Joint Commission Journal on Quality and Patient Safety

The Joint Commission Journal on Quality and Patient Safety (JQPS) is a peer-reviewed journal providing health care professionals with innovative thinking, strategies and practices in improving quality and safety in health care. JQPS is the official journal of [The Joint Commission](#) and [Joint Commission Resources, Inc.](#) Original case studies, program or project reports, reports of new methodologies or the new application of methodologies, research studies, and commentaries on issues and practices are all considered.