

## What is the average call ratio for a typical US anesthesia group?

The value is not available because it would be subject to a non-statistical error related to the definition of “call.”

For example, consider 5 anesthesiologists who work 12 hour shifts at an OB unit starting at 7 AM. There is always at least 1 OB anesthesiologist in house. In addition, there is one anesthesiologist available as a backup from home outside of regular hours, but that person needs to come to the hospital less often than 1 time per week, and then usually only has to stay for 1 to 2 hr.

Which of these hours worked is “on call?” There is no definitive answer to this question. Is the person covering from 7 PM to 7 AM “on call” or is this just a regular shift? Is the person available to come in from home “on-call” for the entire time of potential return, or just for the time when presence was actually required?

In contrast, the staffing, staff scheduling, staff assignment, scheduled hours, and hours worked late can be calculated. The science is based on those quantities and surveys can measure them as well. [Click here](#) for a lecture with more details. The anesthesia group’s percentage of cases on nights and weekends can be monitored, and it differs a lot among hospitals: [click here](#).

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