Abstract
Training to become a physician involves long work hours that can be physically demanding, particularly for surgeons. Are birth outcomes of physician mothers affected as a result? Using Texas birth data from 2007-2014, we compared birth outcomes between physicians and another highly educated group, lawyers, and between surgeons and non-surgeon physicians. Further, using a difference-in-differences framework, we examine whether the Accreditation Council for Graduate Medical Education 2011 duty hour reform, which lowered trainee work hours, impacted the birth outcomes of babies born to physicians compared with lawyers. We find that physicians have an increased incidence of having low birthweight and small for gestational age infants as well as having lower birth weights and shorter pregnancies than lawyers, with the results driven by physicians in surgical specialties. In addition, we find evidence that duty hour reforms were associated with improved birth outcomes for younger physicians (trainees), those whose work hours were impacted by the reforms. Thus, we find that physicians tend to have worse birth outcomes than lawyers and work reforms may have reduced the difference. In order to retain female physicians who want to have children, stronger work reforms or additional changes to the work environment may be needed.