

The “always-on” resident: protecting educational recovery and patient safety in 2026

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To the Editor, Resident wellbeing is increasingly discussed in terms of duty-hour compliance; however, digital connectivity during off-duty hours is an overlooked contributor to burnout and compromised learning. Hospital-integrated messaging systems and informal platforms such as WhatsApp frequently keep trainees cognitively engaged outside scheduled shifts, creating a culture of constant availability.

Emerging evidence from South Asia and comparable settings suggests that persistent digital interruptions contribute to alert fatigue, decreased psychological detachment, and a higher risk of distraction-related errors. While duty-hour regulations limit physical presence, they do not address the continuous cognitive engagement imposed by non-urgent communications.

From an educational perspective, recovery time is essential for reflective learning, consolidation of clinical reasoning, and professional development. Without protected cognitive rest, trainees are at risk of impaired attention and reduced capacity for learning.

Structured policies for digital boundaries, including defined non-urgent communication windows and

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escalation-only protocols outside scheduled shifts, may support trainee wellbeing and safeguard patient safety. Recognising digital disconnection as a component of educational design may facilitate institutional adoption.

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