Title

An Interprofessional Paging Training Program for a Fourth Year Internship Readiness Course

Authors

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Conclusions: A simulated SVI with focused feedback appears to largely alleviate anxiety related to the new requirement for EM bound students. Despite a lack of specific information regarding the content of the SVI and details of the scoring rubric, our simulated SVI mirrored the questions in the actual SVI. Potential limitations of this study include the small sample size, and a lack of information on the question format in the actual SVI prior to creating our simulation.

3 A Wellness Assessment of Residents' Significant Others

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Background: Resident physicians have high rates of burnout and mood disorders. The effect of residency on residents' significant others (SO's) has not been previously explored.

Objectives: To assess the overall well-being and stress levels of residents' SO's, as well as potential factors that detract from SO's wellness.

Methods: An anonymous electronic survey was sent to residents with requests that they forward it to their SO for completion. SO was defined as a spouse, domestic partner, romantic partner, or close family/friend who serves as their primary source of personal support. The survey assessed the effect of residents' work hours and scheduling, personal and professional sacrifices of SO's to accommodate their resident's career, and the effects of residents' stressors at work on their personal lives. SO's were also asked to provide specific ideas to the residency program that could improve their wellness. Responses were primarily reported on a 5-point Likert scale, while others were open-ended.

Results: The survey was sent to 61 emergency medicine residents, and we received 12 responses from SO's. All who responded reported being in a romantic relationship with the resident for an average of 6.6±3.3 years, and 59% were married. 42% of SO's reported that they also work in healthcare, and 42% reported making professional sacrifices to enable their SO's current residency position. A majority (83%) reported that their relationship was under more stress in residency, and 67% reported seeing increased depression, anxiety or neuroticism in their resident. SO's rated the lack of scheduling flexibility (4.5±0.9 out of 5) and night shifts (3.9±1.2) as the biggest sources of stress. Residents' stresses from work (i.e. bad outcomes, difficult patient or colleague interactions) were not a major source of stress at home (2.2±1.6). SO's suggestions for improving wellness primarily focused on improving flexibility and advanced notice of schedules, providing more consistent work hours, and improving note-writing efficiency to decrease the post-shift administrative burden.

Conclusions: Significant others' wellness is strongly affected by their residents' professional responsibilities. Efforts to improve SO wellness could focus on resident efficiency and improved scheduling parameters.

4 An Interprofessional Paging Training Program for a Fourth Year Internship Readiness Course

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Background: Effective responses to pages from nurses regarding acute inpatient concerns is an essential skill for a medical intern. However, few senior medical students receive adequate training. Previous studies have shown mock paging to be a valid and reproducible method for improving paging performance. Studies have not evaluated the feasibility for these programs to be used between a nursing student and medical student.

Objectives: The purpose of this pilot study was to determine 1) feasibility of developing a mock paging program between master's level nursing students and 4th year medical students during a 4th year internship readiness course; 2) if this program increased medical student performance over time with post-paging feedback from the nursing student; and 3) if the program improved the medical students' self-reported preparation to answer pages.

Methods: This was an observational prospective design in an academic center, using a within subjects method with repeated measures. Six cases and checklists surrounding common inpatient scenarios were developed and refined by faculty physician and were administered by phone to 40 fourth year medical students by master's level nursing students. A Friedman 2-Way Non-Parametric ANOVA was used to determine if there were differences in performance across cases. Students were surveyed about their level of preparedness before and after the paging program, and 3 months into residency. Interrater reliability of checklists was determined by a Fleiss' Kappa statistic, with 10 master's level nursing students listening to 4 prerecorded cases.

Results: Data from a total of 216 phone calls were analyzed for 36 students. A statistically significant increase ($p<.001$) in student-reported preparedness for responding to nursing pages was seen comparing pre-course survey to post survey, as well as pre-course survey to final survey. However, no statistically significant improvement of checklist scores was observed over the curriculum. Interrater reliability for 4 of the 6 cases was greater than .6 for each case.

Conclusions: A pilot mock paging program instituted between 4th year medical students and master's level nursing students shows an improvement in self-reported preparedness to answer pages, but it does not show improvement over time in

checklist item completion. Limitations include size and lack of controls for preparedness measures.

5 Anticipated Versus Actual Use of EMRA Match Filters

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Background: EMRA Match is a collaborative, crowd-sourced, searchable, filterable emergency medicine residency program directory endorsed by EMRA, CORD, CDEM, and ACEP. In 2015, third and fourth year medical student members of EMRA were surveyed to determine which program attributes they considered most important when selecting a residency program. The program attributes indicated as being most important to students were included as search filters in EMRA Match.

Objectives: The purpose of this investigation was to evaluate the use of filters on EMRA Match, and to compare actual use to anticipated use from the student preferences survey conducted prior to the addition of the filtering function.

Methods: The 2015 student survey used to develop EMRA Match evaluated the importance of 16 attributes that could be used to select an emergency medicine residency program. Preference for geographic location, length of training, and program accreditation type were omitted as the importance of these has previously been validated. EMRA Match currently contains 23 filters that could be applied to search for residency programs. The overall number of searches and use of each filter was tracked for all visitors to EMRAMatch.org. There were ten program attributes for which both survey perceived importance, prior to the launch of EMRA Match, and actual usage patterns were available.

Results: Between June and November of 2017, 202,307 searches made. Applying a new filter also counts as a search. Forty-thousand searches were made by 1310 users with EMRA. org accounts. Twenty-one percent of logged in users applied filters to their searches. Overall, the actual usage of filters was less than anticipated. Between one-third and 40% of students used the ACGME/AOA Accreditation, Name or Location, and Program Length filters. Students used the Step 1 Cutoff, Percent Osteopath, and Training Environment filters more than anticipated, and the Shift Length and Shifts Per Month filters less than anticipated.

Conclusions: The actual usage of filters on EMRA Match differs from what would have been anticipated based on prior survey data. Further efforts may be required to educate students that using filters can help them develop a targeted application strategy. These results may also warrant updating the EMRA Match user interface to make it easier to apply the most popular filters.
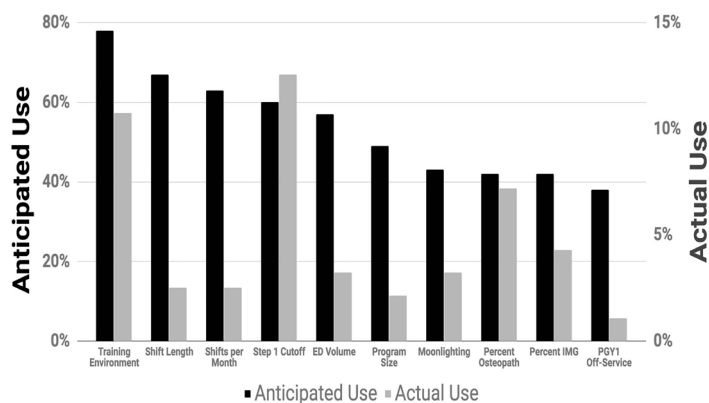

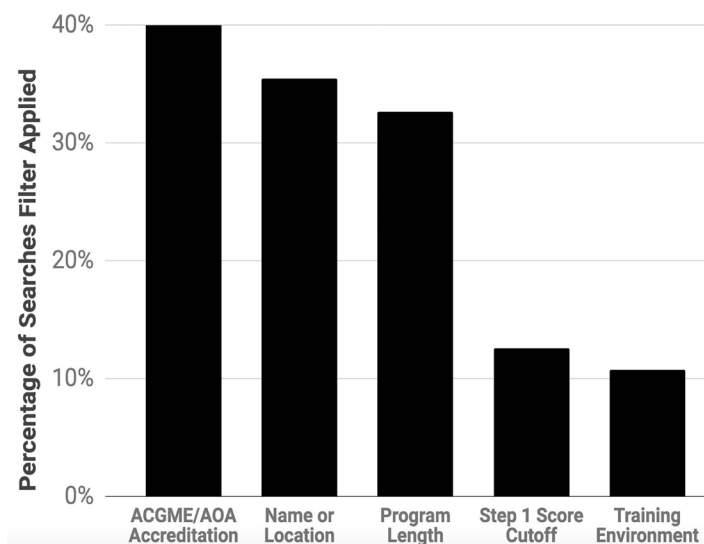**Figure 1.** Anticipated versus actual use of filters by logged-in users of EMRA Match.

Figure 2. The top five filters applied by logged-in users of EMRA Match.

6 Applicant Attitudes Towards the Standardized Video Interview - An Interim Analysis

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Background: The Standardized Video Interview (SVI) was developed by the Accreditation Council for Graduate Medical Education (ACGME) with the goal of allowing applicants to include objective information beyond traditional academic measures. The SVI is comprised of six questions with the goal of evaluating applicant knowledge of professional behaviors, and interpersonal and communication skills. During the 2018