

would lead to increased usage of the study program.

**Methods:** Emergency medicine residents at Barnes Jewish Hospital/Washington University School of Medicine are split into 6 “families” for educational exercises. Each “family” has 8 members, with 2 representatives from each class (PGY 1-4). Data were collected from September-December, 2014.

In this prospective observational trial, each resident was granted free access to the Rosh Review, an online study tool that consists of emergency medicine-specific questions. The program is accessible via computer or mobile device application. Calendar months were divided into alternating “Family Challenge” months and control months. During “Family Challenge” months, the number of correctly answered questions was tallied and weekly scoreboards were disseminated via email. The winning family was that which correctly answered the most questions at the end of the month. Only correctly answered questions were counted in order to control for honest effort when completing questions. There were no prizes.

**Results:** During the “Family Challenge” months of September and November a total of 6,692 correctly answered questions were completed compared to a total of 3,508 (p=0.009) during the control months of October and December. Table 1 compares the number of correctly answered questions organized by residency family and month.

**Conclusions:** Our study showed that gamification can be used to increase the use of an online study tool by emergency medicine residents. Showing competitors a scoreboard each week motivated them to complete more questions.

**Table.** Number of Correctly Answered Questions by Family.

|           | September* | October** | November* | December** |
|-----------|------------|-----------|-----------|------------|
| Sopranos  | 372        | 166       | 404       | 700        |
| Huxtables | 325        | 101       | 415       | 536        |
| Fockers   | 844        | 218       | 756       | 150        |
| Corleones | 424        | 184       | 396       | 193        |
| Bluths    | 1125       | 481       | 820       | 363        |
| Joneses   | 478        | 170       | 333       | 246        |
| Total     | 3568       | 1320      | 3124      | 2188       |

\*Family Challenge” month

\*\*Control month

(EM) residency programs devote an immense amount of faculty time predicting which applicants will be most successful in residency and rank them accordingly on their program’s Rank Order List (ROL). However, few studies have investigated if ROL position, presence of a medical student rotation at their respective program prior to matching, or USMLE rank within a class are predictive of residency performance.

**Objectives:** To examine the correlation of initial rank position, USMLE scores and presence of a medical school rotation to a resident’s final rank at the end of residency in order to guide future ranking processes.

**Methods:** All full-time EM faculty at Los Angeles County + University of Southern California, Harbor - UCLA (Harbor), Alameda County - Highland (Highland), and the University of California - Irvine (UCI) ranked the classes of 2013 and 2014 at time of graduation. From these anonymous surveys, a graduation rank list was created. This graduation rank list was then compared to each class’s USMLE Step 1 rank within a class, rank order list, and presence of a medical student rotation using Spearman’s rho.

**Results:** A total of 93 residents, spanning 2 graduating classes, at 4 EM residency programs in California were evaluated. Residents’ initial ROL was not correlated with final graduation rank order (Rho=0.14, p=0.19). This was true for the pooled sample as well as individual programs. Interestingly, among the subgroup of individuals who had rotated as a medical student at their respective programs, ROL did significantly correlate with final ranking (Rho=0.31, p=0.03). We did not observe a significant correlation between USMLE step one scores and graduation rank (Rho= 0.15, p=0.14).

**Conclusions:** This multi-center study showed that USMLE Step 1 score rank within a class and position on initial rank order list did not predict resident performance at time of graduation. However, ROL was predictive of future residency success in the subgroup of residents who had completed a sub-internship at their respective programs. These findings should guide the future selection and ranking processes of emergency medicine residencies.

## 61 When do Sub-Interns Prefer to Interview?

*Hoffman D, Clauson A, Shoenberger J, Tabatabai R, Taira T, Osterman J, Wagner J/Los Angeles County + University of Southern California Medical Center, Los Angeles, CA*

**Background:** Traditionally, all 4th year sub-interns rotating in Emergency Medicine at LAC+USC were invited back for their residency interview during interview season (Nov-Jan). This required students to travel back to Los Angeles at a later date to interview and filled a large number

## 60 What Predicts Resident Performance?: A Multi-Center Study Examining the Association Between Resident Performance, Rank List Position, and USMLE Scores

*Wagner J, Schneberk T, Camilon M, Hern G, Jordan J, Osborn M, Menchine M / LAC+USC, Los Angeles, CA; Alameda County Medical Center, Highland General Hospital, Oakland, CA; Harbor UCLA Medical Center, Harbor, CA; UC Irvine Medical Center, Irvine, CA*

**Background:** Each application cycle, emergency medicine

of our program’s interview spots.

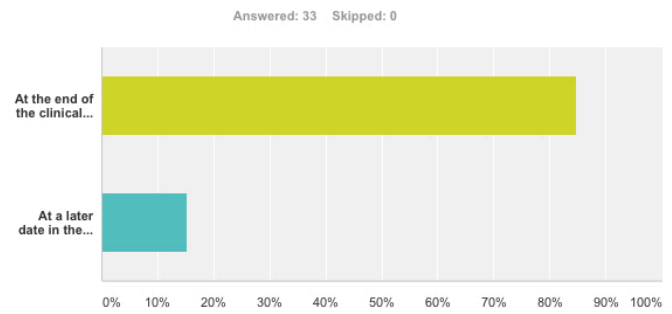
**Objectives:** The aim of this study was to determine if interviewing sub-interns during their rotation would be favored positively. We hypothesized that students would prefer this option, as it would save them time and money. It would also benefit our program as we could cut down the number of interviews offered during interview season, decreasing faculty interview fatigue.

**Methods:** Design: Using an online survey system, students were anonymously asked 4 multiple-choice questions following the match. Setting: Los Angeles County + University of Southern California. Participants: All visiting 4th year medical students who rotated at LAC+USC as EM sub-interns and matched in EM during the 2014-2015 application cycle. Observations: Answers were compiled and compared between one another.

**Results:** A total of 33 students completed the survey. Q1: Advantages to interviewing at the end of the rotation (100% save money/travel costs, 73% less stressful interview, 64% allows better familiarity with program, 48% allows applicant to leave better impression, 21% allows for earlier decision making, 0% no advantage). Q2: Interviewing at end of the rotation was (18% advantageous, 15% disadvantageous, 67% neither). Q3: Disadvantages to interviewing at end of rotation (51% incomplete application at time of interview, 48% program may forget about applicant at rank time, 30% does not allow enough time to prepare/practice for interview, 24% none, 18% applicant may forget specific aspects of program). Q4: If I could do it again, I would prefer my interview at (85% the end of rotation, 15% a later date).

**Conclusions:** EM bound 4th year medical students prefer interviewing during their sub-internship as it saves money and time, while providing a less stressful interview experience. Anecdotally, this intervention also significantly cut down on faculty fatigue as roughly 50-60 interview spots were eliminated from our interview season (Nov - Jan) while still interviewing the same number of applicants.

**If I could do it again, I would prefer my interview at LAC+USC to be:**



| Answer Choices                          | Responses |
|---|-----------|
| At the end of the clinical rotation     | 84.85% 28 |
| At a later date in the interview season | 15.15% 5  |
| Total                                   | 33        |

Figure 2.

## 62 Women Leaders in Academic Medicine: A Chair’s Perspective

Jaglan S /New York University School of Medicine, New York, NY

**Background:** Since 1975, the medical field has seen a six-fold increase in female physicians. According to the AAMC in 2011-2012, women represented 37% of full-time medical school faculty, 43% of assistant professors, 20% of full professors, 14% of department chairs, and 12% of medical school deans. Despite this great increase, there is a “trickling off” effect of women in high-level leadership positions, especially as full professors, department chairs, and medical school deans.

**Objectives:** Assess the leadership culture in a prominent academic medical center and to gain a greater understanding of the perspectives that department chairs have on women in academic leadership positions.

**Methods:** Our study was conducted between May 2013-August 2013. We interviewed 18 of 25 clinical department chairs within our institution, a 72% response rate. Each interview was 20-40 minutes with standardized questions, including open-ended questions on their views on leadership characteristics, the barriers women face, why they face them, and possible solutions. All interviews were recorded, transcribed and remained confidential. The department chairs were only excluded if they were unable to schedule an interview during that time.

**Results:** The most cited barriers to women in leadership positions were Experience, Work-Life Balance, Self-Perception, and Specialty. Of our chairs, 89% discussed Work-Life Balance as the major barrier to women attaining leadership positions. In accordance, 39% felt that child-bearing years, or “time lag”, is discriminatory against women. 28% felt that women tend to lack self-promotion/negotiation skills (Self-perception), which

**Which of the following do you feel are advantages to interviewing at the end of your rotation (mark all that apply):**

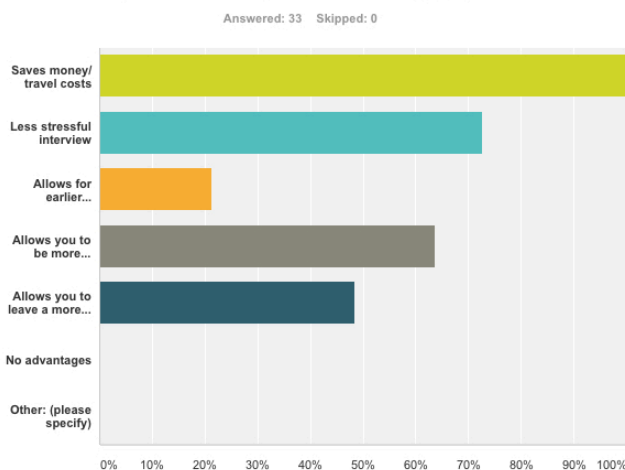


Figure 1.