

to make clinical decisions. The most important radiology studies to be able to independently interpret were x-rays obtained for lines/tubes, chest x-rays and x-rays obtained for musculoskeletal related complaints.

**Conclusions:** A minority of EM residency programs have formal training in radiology despite the majority of program leadership believing that these are important skills. The most important curricular areas were identified. These results may inform the development of formal radiology curricula.

**Table 2.** Residents should be able to independently interpret the following radiologic studies at graduation (1=strongly disagree, 5=strongly agree).

	Strongly disagree	Disagree	Neutral	Agree	Strongly agree	Weighted Average
X-ray for central line or ET tube, NG/G tube placement	1.41%	0.00%	0.00%	3.52%	95.07%	4.91
Chest x-ray	1.42%	0.00%	0.71%	3.55%	94.33%	4.89
MSK x-ray (i.e. shoulder, elbow, wrist, hand, knee, ankle, foot, etc.)	1.41%	0.00%	2.11%	16.20%	80.28%	4.74
Pelvis x-ray	1.43%	0.00%	4.29%	14.29%	80.00%	4.71
Soft tissue neck x-ray (i.e. pediatric stridor)	1.41%	1.41%	11.27%	29.58%	56.34%	4.38
CT brain (non-contrast)	0.70%	3.52%	7.04%	38.03%	50.70%	4.35
Abdominal x-ray	1.42%	0.71%	15.60%	33.33%	48.94%	4.28
CT cervical spine	1.42%	12.06%	30.50%	36.88%	19.15%	3.6
CT abdomen/pelvis	2.11%	13.38%	29.58%	43.66%	11.27%	3.49
CT angiography chest (i.e. PE)	3.52%	16.20%	33.80%	36.62%	9.86%	3.33
CT chest	4.93%	14.79%	39.44%	35.21%	5.63%	3.22
CT extremity	10.56%	31.69%	38.73%	14.08%	4.93%	2.71
CT/CT angiography (i.e. stroke protocol)	10.56%	31.69%	36.62%	19.01%	2.11%	2.7
MRI brain	28.17%	34.51%	25.35%	11.27%	0.70%	2.22
MRI spine	30.28%	35.21%	23.24%	10.56%	0.70%	2.16

## 28 Emergency Medicine Resident Perceptions of the Didactic Experience During the Covid-19 Pandemic

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**Learning Objectives:** The learning objective of this study was to evaluate the impact of the Covid-19 pandemic on the didactic experience of EM residents in the United States.

**Background:** Due to the onset of Covid-19, many residency programs shifted from in-person education to online learning utilizing web-based platforms. Limited data exist on resident physicians’ perceptions of the educational environment during this time.

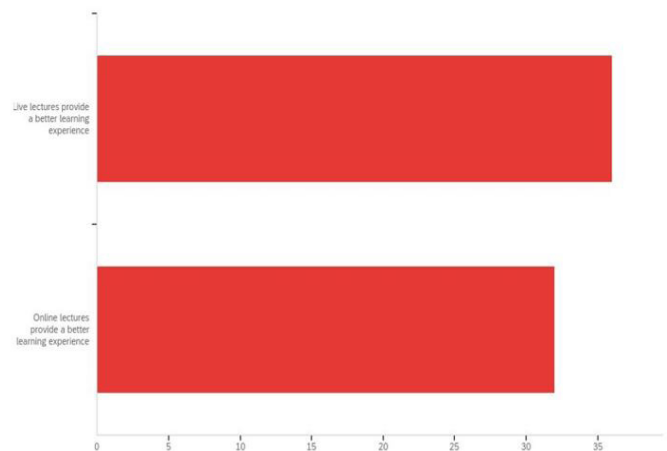
**Objective:** The objective of this study was to evaluate how the Covid-19 pandemic affected the didactic experience of EM residents in the United States. We hypothesized that resident physicians preferred a hybrid model of online and in-person learning.

**Methods:** This observational study (completed in November 2020) assessed EM resident perceptions of the didactic learning environment during the Covid-19 pandemic utilizing an online survey. Participants were invited through the CORD listserv. Subjects included were EM residents and fellows in the US. There were 14 survey questions including demographics and perceptions of aspects of the didactic environment in 2020. Quantitative

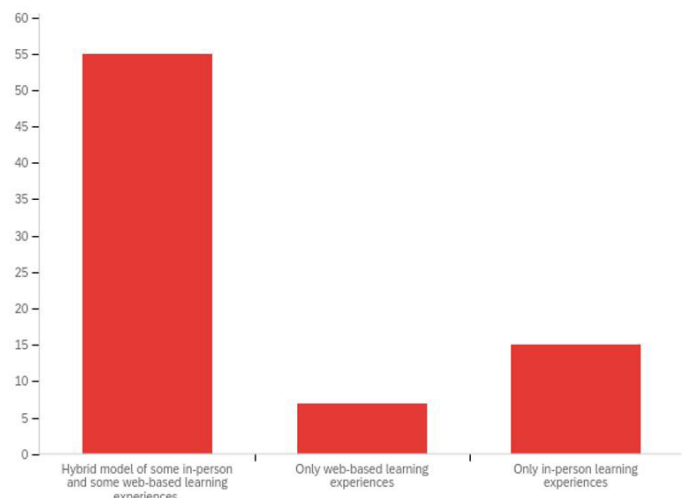
statistical analysis of question responses was performed.

**Results:** 78 participants from 12 states completed the survey. 98.7% of subjects reported that some or all their in-person meetings were temporarily stopped during the Covid-19 pandemic. 98.7% of residents reported that their residencies utilized web-based meeting platforms. 77% of respondents indicated that their didactics were still being held virtually. 46% of subjects reported that live lectures provided a better learning experience than online. 15% of respondents kept their webcam on during the entire online learning experience. When envisioning July 2021, 71% of respondents answered that they would like to see their programs utilize a hybrid model of in-person and online learning.

**Conclusions:** Most programs temporarily stopped all or some of their in-person meetings and utilized a web-based meeting platform. Many residents preferred a hybrid model of learning. Limitations included sample size. This study provided valuable data on trends in EM education during the pandemic.



**Figure 1.** Comparison of online lectures and live, in-person lectures.



**Figure 2.** Resident preferences for future didactic learning experience.