

Patient Perceptions of Resident Interpersonal and Communication Skills in the Emergency Department: An Analysis by Post-Graduate Year of Emergency Medicine Residents and Off-Service Residents

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Objectives: We sought to evaluate patient perceptions of interpersonal and communication skills (ICS) of residents working in the emergency department (ED) and whether patient perceptions differ between training programs [emergency medicine (EM) v. Off Service (OS)] and by post-graduate year.

Methods: A ten-question survey was developed, pilot tested and applied to consenting residents over a three-month period beginning October 15, 2007. Questions focused on communication and professionalism. Resident and patient participation was voluntary and anonymous. Patients were interviewed by student volunteers at the time of discharge. Responses to each question were dichotomized. Patient perception of residents' ICS between programs and years were compared using a logistic GEE regression while controlling for patient-related confounders.

Results: Three hundred seventy-five surveys were collected based upon 24 EM residents and 11 OS residents (four Family Practice, two OB/GYN, five Internal Medicine) including 13 interns, 13 PGY2 and 9 PGY3. No statistical significant difference was found between program type or residency year for all questions. However, interns were perceived to have better ICS than senior residents. For example, the proportion of positive response for "communication with patients" was 91%, 86%, and 83% for interns, PGY2, and PGY3, respectively, and for "explaining diagnoses," 81%, 76%, and 75% respectively.

Conclusions: Though no statistical significant difference was found, our study demonstrates a trend: patients perceive interns, regardless of training program, to have better ICS compared to their senior colleagues. While this perception is likely multi-factorial, interns spending more time with patients in the ED compared to upperclassmen and more ICS education during medical school compared to residency may in part be responsible. A powered study is needed to confirm the trend.