

Figure.

Table. Pre and post- intervention droperidol usage by indication.

	Pre-Intervention	Post-Intervention
Nausea/Emesis	19	170
Agitation	4	58
Headache	4	7
Other	0	3
Total	27	238

18 Comparative Analysis of Emergency Medicine Standardized Letter of Evaluation Between Chief Resident vs. Non-chief Resident: A Preliminary Report Based on Objective Domains

Zaid Tayyem, Chaiya Laotepitaks, Christopher Wetzel, Peter Tomaselli, Carlos Rodriguez, Abagayle Bierowski, Casey Morrone, Ridhima Ghei, Xiao Zhang

Background: Chief residency in EM is a highly competitive leadership position that allows ‘chiefs’ to represent their co-residents, perform administrative and education functions, and serve as liaisons between the hospital and the residency program. The chief selection process can be rigorous and varies by residency program.

Objective: To determine whether the Standardized Letter

of Evaluation (SLOE) can predict which residents are more likely to become chiefs based on their qualifications and global SLOE assessment.

Methods: De-identified SLOEs from 2015 to 2021 at an urban center EM residency were collected for data analysts as part of a retrospective observational study. Each question from ‘Qualification of EM’ and ‘Global Assessment’ were given a numeric score, 1 to 4, depending on the number of selectable options (i.e. Above Peers=3, Below peers =1; top 10%=4, lower 1/3=1). For each question, a T-test was used to determine if there was a difference between the mean score for residents selected to be chiefs and all others.

Results: We selected and performed a quantitative analysis of 10 quantitative questions; five had statistically significant differences between the chiefs and non-chiefs. Chiefs were more likely to be ranked in the top 1/3 on the program rank list (2.94 vs 2.541, n=233, T=3.1, P=0.002), more likely to be evaluated in the top 1/3 compared to previous year’s applicants (2.904 vs 2.516, n=243, T= 3.056, P= 0.002), more likely to succeed in residency (2.442 vs 2.241, n=243, T=2.361, P=0.019), less likely to need guidance (2.442 vs 2.241, n=243, T=2.361, P=0.019), and more team-oriented (2.712 vs 2.476, n=243, T=2.865, P=0.005).

Conclusion: While there is not a clear predictor of which resident will become a chief resident, preliminary analysis of SLOEs revealed applicants who were more team-oriented, with slightly higher ranking, while requiring less guidance were more likely to become future chiefs.

19 Current State of Social Media Use in Emergency Medicine Residencies

Zachary Repanshek, Lauren McCafferty, Jay Khadpe, Kristy Schwartz, Michael Fink, Abbas Husain

Background: In the 10 years since CORD first published best practices for social media (SM) use, nearly all EM residency programs have had some form of SM presence. Initially focused on education, SM is now a key tool for program branding and recruitment. With recent shifts in the state of SM, including the change in ownership of Twitter (X) and the rise of visual platforms like Instagram (IG) and TikTok, we aim to identify the current trends in EM residency SM use.

Objective: This study describes and quantifies the current usage of various SM platforms by EM residencies. We hypothesize that utilization of IG has become more prevalent compared to that of blogs, Facebook (FB), and X.

Methods: Using the EMRA Match site, 239 unique EM residency programs were evaluated for the presence of six digital platforms, as self-reported by individual programs. We only included platforms which posted novel content during the study period (September 2022-August 2023). An analysis of engagement was performed by quantifying posts for X and IG.

Results: Table 1 shows the prevalence of each platform in EM programs. Our analysis found that most programs maintain a website. X and IG are the most commonly used SM platforms, FB and blogs are infrequently utilized, and TikTok is nearly entirely absent. While the prevalence of X and IG is effectively equivalent, the engagement with IG was higher, with a mean of 60 IG posts/program over the year-long study period vs 36 for X. Figure 1 shows the average monthly posts per platform.

Conclusion: These findings demonstrate that IG is now the most utilized SM platform for EM residencies, a shift from previous studies that identified X as most popular. A limitation of this study is that IG Stories could not be quantified, meaning that utilization of IG is likely even higher than reported. TikTok is rarely used by EM residencies, despite being the most globally downloaded app, and is a potential for future focus.

Figure 1. Average monthly social media posts per EM residency program.

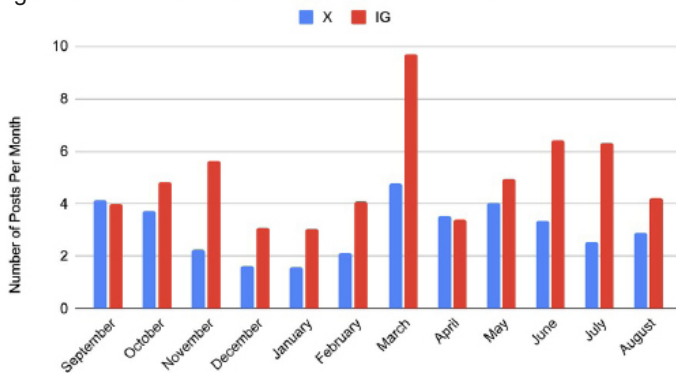


Table 1. Presence of EM residency digital platforms.

	Yes	No	Prevalence (%)
Website	203	36	85
Blog	35	204	14
FB	41	198	17
X	103	136	43
IG	102	137	42
TikTok	1	238	0.004

20 Rapid Cycle Deliberate Practice vs Traditional Simulation for Neonatal Resuscitation Training and Retention of Skills

Jessica Parsons, Deborah Pierce, Anthony Sielicki, Caitlin Boyle, Joseph Pavlik, Kelly MacKenzie

Background: Neonatal resuscitation protocol (NRP) is a required component of EM residency education. As a rare

but high acuity event, NRP is often taught and reinforced through SIM. Rapid cycle deliberate practice (RCDP) is a method of SIM that uses frequent interruptions to immediately correct mistakes and provides opportunities for repetitive practice. RCDP may be a better method than traditional SIM for teaching and reinforcing NRP skills.

Objectives: We compared traditional SIM versus RCDP on improvement and retention of team NRP skills. Our hypothesis was RCDP will result in greater improvement of team NRP skills and these skills will be retained at six months.

Methods: Thirty EM PGY1-4 residents were divided into six teams in January 2023. Each team participated in an NRP SIM case that was video-recorded and scored by two blinded raters using a validated NRP scoring tool. Then, three teams had the traditional SIM training with a post-scenario facilitated debrief and three teams had RCDP of NRP. Three days later, all teams had a post-test NRP SIM case. Retention testing occurred in June 2023 and involved testing ad hoc teams of three residents who all had either traditional SIM or RCDP of NRP. The post-tests and retention NRP SIM cases were graded by two blinded raters.

Results: Due to audio error, the pretest for one of the traditional SIM teams could not be scored, so this pretest was excluded. Both the traditional SIM and the RCDP groups demonstrated significant improvement in NRP scores, however, post-test scores were not statistically significant different between the two groups. Average scores for both groups showed significant degradation of NRP skills after six months.

Conclusion: Both traditional SIM and RCDP improved NRP team performance but a study with higher power is required to detect differences between the two types of SIM. Residency should incorporate NRP frequently as there was significant degradation in skills after six months.

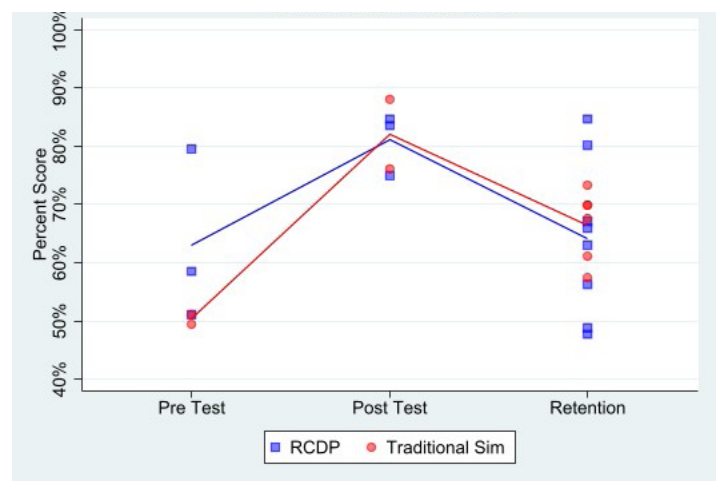


Figure 1. Neonatal resuscitation scores.