Table 2. Introduction to narrative medicine post-session survey responses.

The following questions were answered on a Likert scale of 1 – 7 (1=Not true, 4=Somewhat true, 7=Very true)	N	Mean	SD	Median	25th Pctl	75th Pctl	Min	Max
Regarding your interest/excitement around the session:								
I enjoyed doing this activity very much	18	5.83	1.15	6.00	6.00	6.00	2.00	7.00
This activity was fun to do.	18	5.78	1.26	6.00	5.00	7.00	2.00	7.00
I thought this was a boring activity.	18	2.28	1.53	2.00	1.00	3.00	1.00	6.00
This activity did not hold my attention at all.	18	2.00	1.33	2.00	1.00	2.00	1.00	5.00
I would describe this activity as very interesting.	18	5.83	1.26	6.00	6.00	7.00	2.00	7.00
I thought this activity was quite enjoyable.	18	5.78	1.31	6.00	6.00	7.00	2.00	7.00
While I was doing this activity, I was thinking about how much I enjoyed it.	18	4.83	1.86	5.50	4.00	6.00	1.00	7.00
Regarding your perceived competence with narrative medicine:								
I think I am pretty good at this activity.	17	4.88	1.58	5.00	4.00	6.00	1.00	7.00
I think I do pretty well at this activity, compared to other students.	17	4.53	1.43	4.00	4.00	6.00	1.00	6.00
After working at this activity for a while, I felt pretty competent.	18	4.94	1.44	5.00	4.00	6.00	1.00	7.00
I am satisfied with my performance at this task.	17	5.00	1.41	5.00	4.00	6.00	1.00	7.00
I was pretty skilled at this activity.	17	4.65	1.27	5.00	4.00	6.00	1.00	6.00
This was an activity that I could not do very well.	17	3.29	1.93	2.00	2.00	5.00	1.00	6.00
How did you feel about the value and usefulness of this activity?								
I believe this activity could be of some value to me.	18	5.72	1.32	6.00	5.00	7.00	2.00	7.00
I would be willing to do this again because it has some value to me.	18	5.94	1.16	6.00	5.00	6.00	1.00	7.00
I believe doing this activity could be beneficial to me.	18	5.72	1.32	6.00	5.00	7.00	2.00	7.00
I think this is an important activity.	18	5.00	1.83	6.00	5.00	7.00	1.00	7.00

question	N = 18
Please type in how you feel about the usefulness and value of this activity in some sentences:	
	13 (72.2%)
Helps to focus me on track	1 (5.6%)
I felt very useful in ED setting as we see patients at their worst time. Allows us to step back and approach pt's from humanistic side especially for frequent flyers.	1 (5.6%)
I think that my medical training prepared me to assist and improve patient care. It never equipped me with the tools to improve my personal care. We are secondary patients in the medical scheme and if we are ill, our patients will not receive quality care. This is a simple and great way to give ourselves some self-healing. It may not be for everybody but it is a path.	1 (5.6%)
Too many times we are stuck in our own story. It has amplified me to focus on everything	1 (5.6%)
Useful	1 (5.6%)
I think that doing this activity is useful for:	
	11 (61%)
Approaching patients from humanistic side rather than lab values and imaging	1 (5.6%)
Avoiding pre-conceived prejudices	1 (5.6%)
Empathy, understanding, empathy, self-healing, and self-preservation	1 (5.6%)
Helping to take get more out of pt encounter	1 (5.6%)
Mental health	1 (5.6%)
Reflection and gain some insight to yourself	1 (5.6%)
Talking to other patients at seminar	1 (5.6%)
I think this is important to me because it can:	
	12 (66.6%)
Help improve patient interaction	1 (5.6%)
Help me introspect and evaluate	1 (5.6%)
Hear all better with of management	1 (5.6%)
Leverage the thriving	1 (5.6%)
Make me and pt feel better	1 (5.6%)
Offer me different perspectives and a means to speak for myself and others through a creative manner.	1 (5.6%)
I think doing this activity could help me to:	
	12 (66.6%)
Be a better physician	1 (5.6%)
Be present and listen to myself and others better.	1 (5.6%)
Clear my head	1 (5.6%)
Connect more with my patients	1 (5.6%)
Learn about myself	1 (5.6%)
Manage patients from what they need not just from medical aspect	1 (5.6%)
Would you like to learn more about this topic?	
	3 (17%)
Absolutely!	8 (44%)
Definitely not	1 (5.6%)
Maybe	6 (33%)
Is there any other feedback you would like to give us on this session?	
	14 (78%)
No	1 (5.6%)
I believe this activity would be better to perform if it were done in smaller groups	1 (5.6%)
It was a good session	1 (5.6%)
Just for the survey, the display boxes are a little small to read while typing. Otherwise, I love it!	1 (5.6%)
What level of training are you at?	
Attending Physician	6 (33%)
Medical Student	2 (11%)
PGY 1	2 (11%)
PGY 3	2 (11%)
PGY 4	3 (17%)
Transitional Year (TY)	4 (22%)
How well do you understand what narrative medicine is?	
A little	3 (17%)
I understood what it is	11 (61%)
I understand what it is very well	4 (22%)
How important do you think narrative medicine is to your medical education?	
I feel neutral about its importance	1 (5.6%)
Important	10 (56%)
Somewhat important	1 (5.6%)
Very important	6 (33%)

22 Simulated Model and Ultrasound Trainer for Measuring Transrectal Diameter in Pediatrics

Jaron Kurian, Thomas Sanchez, Dylan Nguyen, Ellen Chow, Hannah Park, Richard Shin

Background: While Emergency Medicine (EM) residents are appropriately trained to use point of care ultrasound (POCUS) to investigate the bladder, they are less familiar with identifying the rectum. The AAP is recommending decreasing use of abdominal X-rays in children (1). Ultrasound is an accurate test and useful adjunct that may help reduce those radiographs (2). A simulated task trainer is not available commercially and is needed to develop the skills necessary to accurately identify the important anatomical structures to measure transrectal diameter to evaluate for constipation.

Objective: Our aim was to create a simulated model of pediatric pelvic anatomy using inexpensive and readily available materials. Creating an open-source, reproducible, and durable model would allow for effective teaching and familiarization with this skill for all EM residents.

Design: We used a block of ballistic gel, a 3D printed plastic model of a pelvis and two water balloons. One balloon was round and filled with water (representing the bladder), and the other balloon was elongated and filled with a mixture of water, ultrasound gel, and starch (representing rectum). The melted gel was layered sequentially to create a TRD model.

Effectiveness/Impact: The model was approved and evaluated by ultrasound faculty prior to its utilization and its use was integrated to teach a scheduled resident conference day. 100% of residents surveyed before and after reported that the model was an effective teaching tool and that they felt more confident in their ability to evaluate and measure TRD after the session. We aim to allow for all EM educators to be able to construct this model to augment education for evaluation of TRD utilizing POCUS.

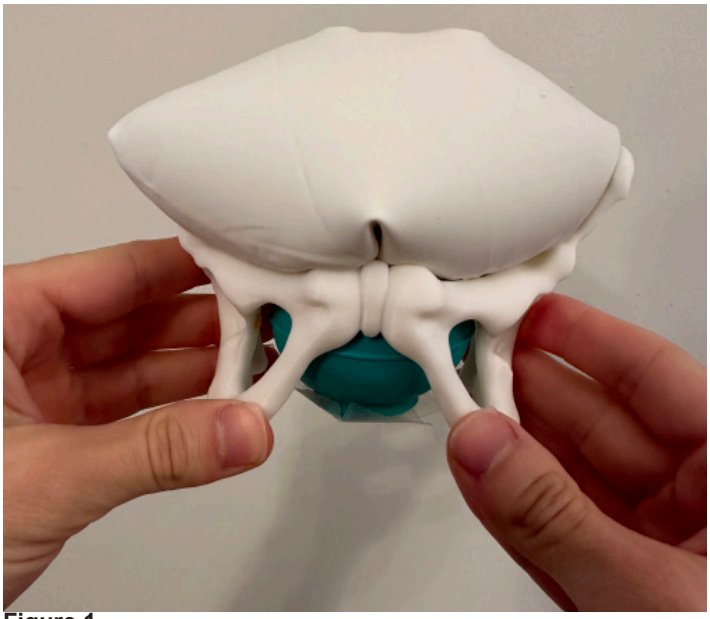

Figure 1.

23 Trauma Team Activation (Interdisciplinary Class-Specific Didactics): A Collaborative Educational Endeavor

Nao Yoneda, Anita Lui, Timothy Khowong, Kallie Combs, David Simon, Joel Aguilar, Rozalyn Hesse, Michael Levine

Introduction: Trauma resuscitations are often co-managed by Emergency Medicine (EM) and Surgery. This multidisciplinary approach recognizes that trauma patients have complex needs requiring expertise from multiple fields. We have also found that educational activities are more effective when they are tailored to the learner's level of education. Here, we present a structured 1-day workshop for surgery and EM residents, separated by postgraduate year (PGY), to teach the