

knowledge and skills of trauma management. By the end of the session, EM and surgery residents should be able to: Describe advanced principles of trauma resuscitation Delegate and assume roles during a trauma resuscitation Identify and manage resources available for a trauma resuscitation or mass casualty incident Appreciate the role of interdepartmental collaboration in trauma care.

Curricular Design: A multidisciplinary simulation training session was held during weekly dedicated resident didactics and included a combination of 45 EM and surgery residents, divided by PGY year. Each class experienced an interactive small-group didactic and a simulated patient case. PGY1s focused on role assignments, trauma decorum, and basic trauma evaluation. PGY2s reviewed advanced resuscitation techniques. PGY3s and 4s focused on an MCI scenario which required allocation of resources. The educational simulation was preceded and followed by pre and post surveys.

Impact/Effectiveness: We instituted this class-specific, multidisciplinary session hypothesizing an improvement in resident knowledge and familiarity of trauma concepts and thus evaluated it on Kirkpatrick levels 1 and 2. There was an overall increase in learner knowledge-based exam scores from 55.6% to 91.8% (p<0.01). Residents rated the sessions with respect to quality of education received and applicability to their own practice highly with an average Likert score of 4.62. Our success in this endeavor will lead to other multidisciplinary didactics.

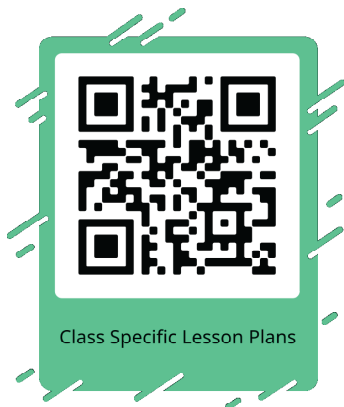


Figure 1.

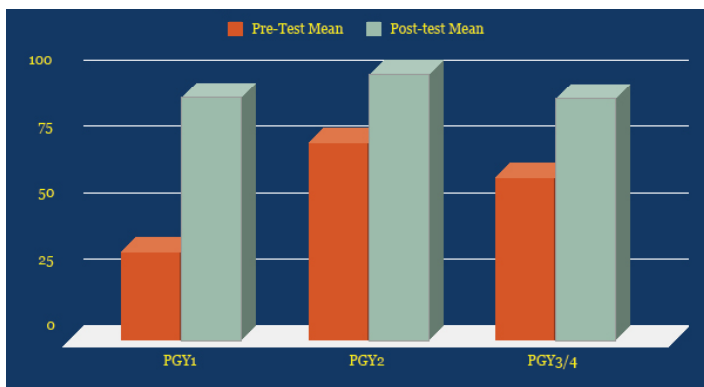


Figure 2. Trauma class-specific didactics pre- and post-test.

24 Does Trauma Informed Care and Debriefing Help Emergency Medicine Residents Process Secondary Traumatic Stress?

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Introduction: Trauma Informed Care (TIC) is a holistic framework that seeks to realize and recognize the signs, symptoms, and impacts that trauma has not only on the patient but on all members of the care team. Secondary traumatic stress is a phenomenon that is described as stress from helping or wanting to help a traumatized person. There are limited studies on the implementation of TIC as a means of addressing resident secondary traumatic stress.

Objectives: Implement the principles of trauma informed care to help residents identify secondary trauma; Demonstrate effective coping mechanisms and communication skills to manage secondary trauma, specifically the skill of debriefing; Assess resident receptiveness to this type of training.

Design: A 4-part curriculum was designed and implemented for 42 EM residents from Nov 2022 to Feb 2023 during conference to ensure that all residents were available for the education. Part 1 provided a brief overview of TIC to acclimate residents to new terminology and overarching concepts. Part 2 was an in-depth overview of TIC, given by Dr. Ken Yeager, a leading expert in the field. Part 3 was an interactive debrief session facilitated by the hospital Spiritual Care team. Part 4 involved residents learning how to integrate TIC into their practice of medicine. Residents were surveyed before and after the curriculum. All 4 lectures can be easily adapted to fit the resources available at any given training site.

Question	t-value	p-value
Q1	2.33	0.027
Q2	1.98	0.062
Q3	2.01	0.054
Q4	1.97	0.063
Q5	-2.50	0.019
Q6	-3.28	0.003
Q7	-2.35	0.027
Q8	1.47	0.154
Q9	0.45	0.657
Q10	-2.33	0.027

Figure 1.