

68 The Effect of Blinding Faculty Reviewers on Increasing Diversity in Residency Recruitment

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Background: The medical field has historically lacked diversity, with residency recruitment influenced by implicit bias. In 2023, the Association of American Medical Colleges reported that only 7.3% of MD EM residents were African American, compared with 64.4% Caucasian, and 41.9% of EM residents (MD and DO) identified as female.

Objectives: To evaluate the impact of blinding faculty reviewers to applicant race and gender on the diversity of medical students interviewed and matched at our EM residency program.

Methods: A retrospective observational study was conducted using Electronic Residency Application Service (ERAS) data from applicants to the Trinity Health Livonia EM residency program from 2018–2025. Demographics of medical students who interviewed and matched before and after the implementation of faculty blinding in September 2021 were compared. Applications missing race and gender were excluded from analysis.

Results: Out of 701 applicants that were interviewed, 41% self-identified as female and 40.5% as non-white. Following implementation of reviewer blinding, there was a statistically significant increase in the proportion of interviewed applicants who were female ($p=0.0003$), non-white ($p=0.0001$), and female or non-white combined ($p=0.0004$). Among the 45 matched residents (42% female, 57% male; 59% non-white, 40% white), differences were not statistically significant for female ($p=0.3975$), non-white ($p=0.1240$), or female or non-white combined ($p=0.2241$). 141 applicants were excluded due to missing demographic information.

Conclusions: Blinding faculty reviewers to race and gender was associated with a statistically significant increase in diversity among interviewed but not matched medical

Image 1. Year-to-year comparative line charts of minority groups for interviewed medical students in proportions

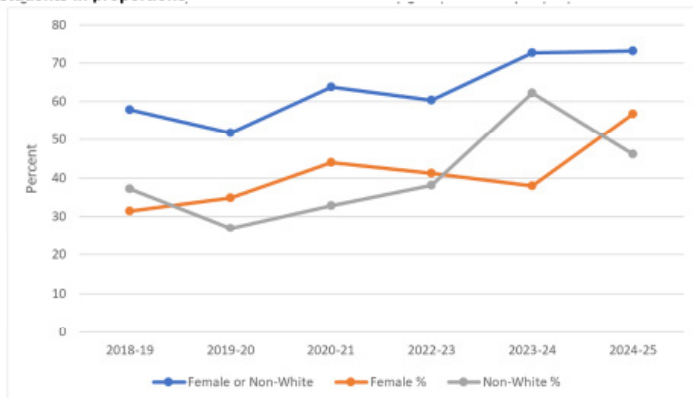
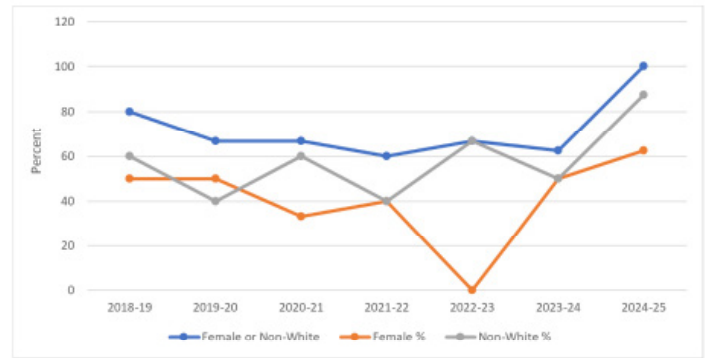


Image 2. Year-to-year comparative line charts of minority groups for matched medical students in proportions



students. The absence of significant findings for matched data may reflect the limited sample size and positions filled through the Supplemental Offer and Acceptance Program. Future research from multiple programs is needed to determine if there is a correlation between blinding faculty and improving diversity in EM residencies.

69 Resident Teaching Confidence: Insights from a Foundations of Emergency Medicine Survey

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Background: Resident-as-teacher (RAT) initiatives are increasingly emphasized in EM residencies. Yet the extent to which residents feel prepared to teach and supervise junior learners and advanced practice providers (APPs) in the ED remains unclear.

Objective: To address this gap, we developed a learner-focused survey assessing residents' confidence in didactic teaching and clinical supervision. We hypothesized that residents would report insufficient confidence in these skills, suggesting unmet needs in RAT training.

Methods: In June 2024, Foundations of Emergency Medicine (FoEM) administered an online survey with piloted Likert-scale and multiple choice questions to program learners. Those who identified as EM resident physicians received questions regarding confidence in teaching and supervision. Descriptive statistics were reported.

Results: The FoEM learner survey collected 929 responses (15.9% response rate), with 791 representing EM resident physicians across 123 programs (PGY-1: 292; PGY-2: 239; PGY-3: 223; PGY-4+: 37). Residents reported moderate confidence across most teaching domains, including delivering lectures (46.5% extremely/quite confident vs 20.6% not at all/slightly confident), teaching junior learners in classrooms (47.9% vs 15.9%) and on shift (55.4% vs 11.8%), supervising junior learners (48.2% vs 17.1%), and supervising procedures performed by junior learners (52.3% vs 15.3%, Fig. 1). Confidence was lowest