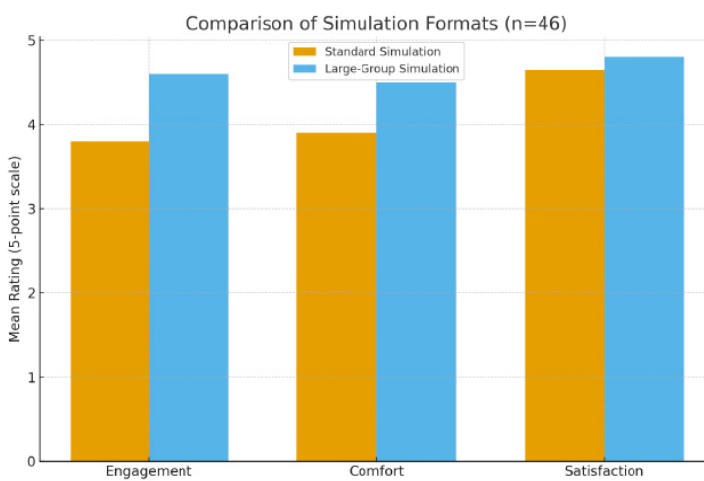
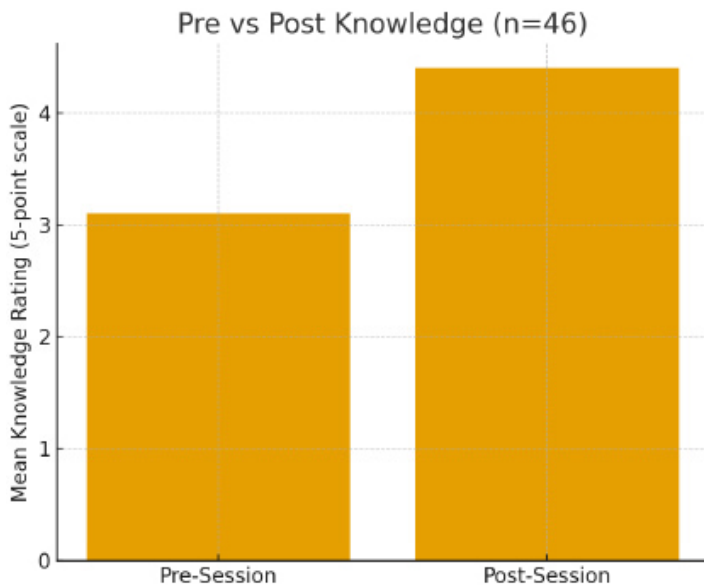


plans include applying the format to new scenarios and evaluating retention.



### 35 Empathy in Emergency Medicine Training: A Novel Experiential Curriculum Focused on Caring for Patients Experiencing Homelessness

Alexander Branson, Chad Holmes

**Background:** Emergency medicine (EM) physicians frequently care for individuals experiencing homelessness, yet traditional residency education often provides limited exposure to community resources and lived patient experiences. Gaps in empathy, systems knowledge, and confidence can hinder effective, compassionate care. Immersive learning experiences may bridge these gaps by acquainting trainees with the environments their patients navigate daily.

**Objectives:** To develop and implement an integrated, single-day experiential learning program for EM interns that enhances

empathy, increases awareness of local homeless services, and improves confidence in caring for unsheltered patients.

**Curricular Design:** All EM interns at a large county hospital in Fort Worth, TX participated in a structured, day-long curriculum consisting of two parts. First, the morning community immersion is a guided walking tour of the Tarrant County homeless district, including facilitated small-group discussions with leadership from multiple day shelters, night shelters, and community resource agencies. Second, the afternoon field experience includes direct engagement with the hospital’s street medicine outreach team, providing supervised patient encounters in unsheltered environments. The curriculum emphasized social determinants of health, local service navigation, trauma-informed communication, and multidisciplinary collaboration. Program outcomes are being measured using pre- and post-experience surveys assessing empathy, resource awareness, and self-reported clinical confidence.

**Impact/Effectiveness:** Preliminary data demonstrate improvement in residents’ understanding of local homeless services, increased empathy toward individuals experiencing homelessness, and higher confidence in caring for unsheltered patients in the ED and community settings. Qualitative feedback highlights the value of authentic patient interactions and strengthened insight into systemic barriers influencing emergency care utilization. Future plans include long-term follow-up to assess sustained impact and program expansion to include longitudinal social medicine integration. Additional analysis will compare outcomes across cohorts to evaluate reproducibility and inform broader implementation.

### 36 All In: A Casino-Themed Emergency Medicine Conference Day

Amar Bukvic, Shorok Hassan, Danielle Langan

**Background:** Gamification has emerged as a dynamic approach in medical education, yet few studies have integrated it into GME. We implemented a casino-themed educational session to enhance learner engagement, confidence, and application of key EM skills. This innovation addresses an educational need for active learning formats that mirror the fast-paced and decision-heavy environment of the ED and aimed to offer a repeatable and adaptable approach that could supplement traditional didactics.

**Educational Objective:** By the end of this educational intervention, participants will be able to demonstrate airway management skills, interpret various electrocardiograms, apply evidence-based management in rapid-response scenarios, and report increased confidence in leadership in high-stress emergency situations.

**Curricular Design:** This prospective educational innovation occurred during a four-hour, casino-themed EM