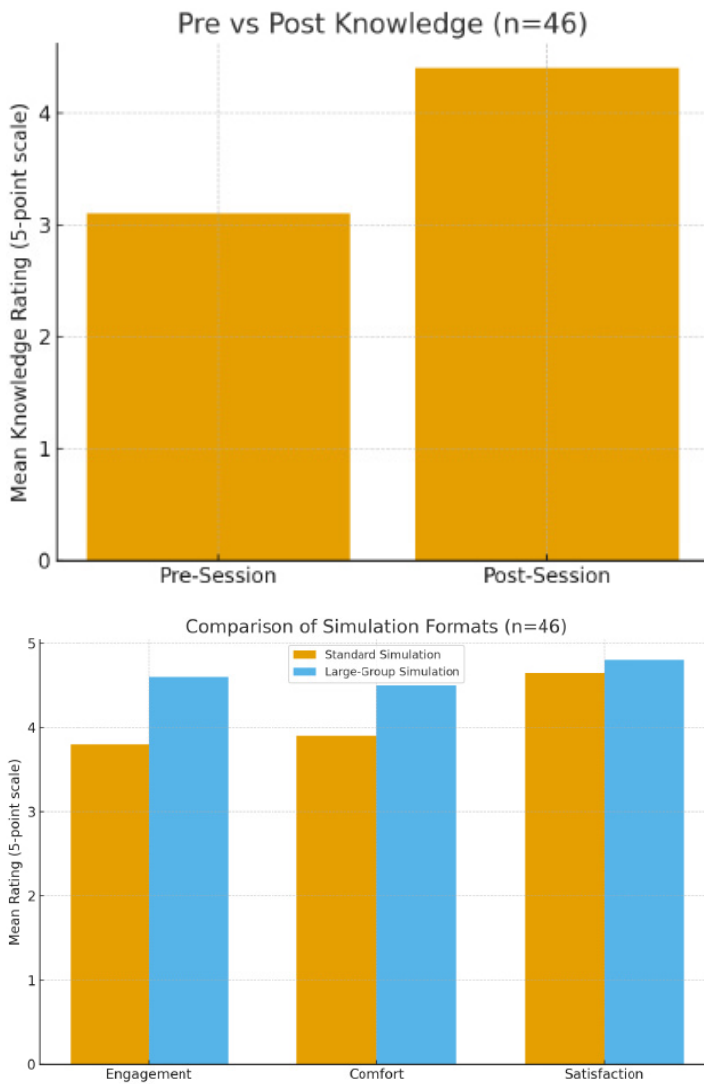


plans include applying the format to new scenarios and evaluating retention.



### 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

conference. Thirty-two learners (26 residents, 2 PA fellows, 4 medical students) rotated through four interactive game stations focused on EKG interpretation, airway management, diagnostic reasoning, and rapid response leadership. Poker chips were incorporated to encourage confidence calibration and accountability in decision-making. Resources included standard conference rooms, airway equipment, simulation manikins, EKG images, and faculty facilitators. Early challenges included station timing and standardizing scoring. Adjustments were made by adding facilitator checklists and fixed station time limits. Learners completed matched pre- and post-conference surveys assessing confidence, perceived skill improvement, educational value, and likelihood of applying skills clinically. Faculty facilitators also evaluated feasibility and effectiveness.

**Impact:** Approximately, 91% of learners reported improved confidence in EKG interpretation, 81% in team-based decision-making, and 69% in rapid response skills. Around 31% noted gains in leadership during high-stress scenarios. Nearly 78% were very likely to apply learned skills in practice, and 100% preferred the format over traditional didactics. Faculty feedback aligned with learner perceptions, highlighting the ease of implementation and strong engagement and supporting expansion to other EM residencies.

### 37 A Novel Murder Mystery Game to Teach Toxidromes and Toxic Alcohol Management to EM Residents

*Leila Getto, Maxwell Blodgett, Kirsten Ward, Christopher Mitchell*

**Introduction/Background:** Gamification is increasingly used in medical education to promote engagement and diagnostic reasoning. While escape rooms and other interactive formats have been described, to our knowledge a murder mystery structure has not been explored. Because toxicologic presentations evolve over time and often share overlapping features, the topic offers a strong educational fit for a progressive, clue-based activity. We developed a toxicology-themed murder mystery to engage Emergency Medicine residents in pattern recognition and collaborative reasoning.

**Educational Objectives:** Objectives were to (1) identify common toxidromes, (2) describe high-yield toxicologic physical exam elements, (3) describe clinical manifestations of toxic alcohol poisoning, (4) describe how toxic alcohol poisonings evolve over time, and (5) describe empiric management for toxic alcohol ingestions.

**Curricular Design:** The narrative was set at an academic conference where the keynote speaker was poisoned and six conference attendees became suspects, played by faculty characters. Each character had a defined motive, weapon (toxin), opportunity, and timeline. A character interaction map tracked how suspects intersected and guided clue placement.

Toxic alcohols were selected amongst five other toxins as the “murder weapon” for their recognizable yet diagnostically challenging features. Six mixed-PGY groups progressed through three rounds consisting of scripted interactions, suspect questioning, and individual group discussion. Each group then submitted their answers regarding the suspected character and toxin responsible for the poisoning. The 2-hour session concluded with a 30-minute lecture reviewing toxidromes, toxic alcohol presentations, exam findings, and management.

**Impact/Effectiveness:** Post-session surveys showed significant increases in confidence identifying toxidromes ( $p=0.007$ ), recognizing toxic alcohol poisoning ( $p<0.001$ ), interpreting laboratory findings ( $p<0.001$ ), and managing toxic alcohol ingestion ( $p<0.001$ ). Learners reported high engagement, and feedback was uniformly positive. This innovation effectively taught high-yield toxicology content and provides a model for incorporating a murder mystery session into an EM curriculum.

### 38 The Role of Housing Stipends on Acting Intern Recruitment: A One-Year Comparison Study

*Richard Dykstra, Andrew Moore, Jessica Pelletier, Rachele Dykstra*

**Introduction:** The visiting student rotation in EM represents a critical opportunity for residencies to showcase their program to prospective students. Although targeted scholarships for Acting Internships (AI) have been described previously, the role and impact of a housing stipend universally offered to visiting students remains unexplored. This initiative sought to use a universal housing stipend to boost the competitiveness of our visiting AI rotation with emphasis on geographic and institutional diversity.

**Educational Objectives:** Increase the number of applicants and geographic diversity of students applying for the visiting student AI in EM.

**Curricular Design:** For the 2025 season, our institution offered a \$500 housing stipend to all visiting students completing our AI in EM. We reviewed the number of applicants, ratio of allopathic versus osteopathic students, the number of schools represented, and the states of schools represented. We used descriptive statistics to analyze our applicants and student cohorts pre- and post-housing stipend implementation.

**Impact/Effectiveness:** In 2024, we received applications from 29 students primarily from osteopathic schools that were in-state or from neighboring states (86% osteopathic, 72% in-state or neighboring state). Post-implementation in 2025, applicants tripled to 101 students (348% increase); they represented an even number of osteopathic and allopathic schools and significant geographic diversity (49% osteopathic, 45% in-state or neighboring state). This drastically different