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Authors

Raj, Leela
Papanagnou, Dimitrios
Vaid, Urvashi
[et al.](#)

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21 Humility in Times of Heightened Uncertainty: A Study of Physician Critical Incidents to Prepare Learners for Uncertainty in Clinical Practice

Leela Raj, Dimitrios Papanagnou, Urvashi Vaid, Henriette Lundgren, Karen Watkins, Victoria Marsick, Ridhima Ghei, Barret Michalec

Background: Uncertainty is a pervasive challenge in clinical practice. While the importance of humility in addressing uncertainty has been discussed in the literature, empirical research on this topic is lacking. Our study aimed to examine the presence and role of humility in physicians' experiences with uncertainty during the COVID-19 pandemic.

Objectives: To identify if and how humility was present in physicians' reflections on uncertain situations during the height of the COVID-19 pandemic, and to explore potential roles of humility in managing uncertainty.

Methods: We conducted critical incident interviews with 12 EM and ICU physicians about their experiences with uncertainty while caring for COVID-19 patients. We deductively coded transcripts for key elements of humility based on conceptualizations by Tangney (2000) and Gruppen (2015). We examined code co-occurrence to identify clusters of humility and conducted iterative thematic analysis to uncover potential roles of humility.

Results: Aspects of humility were frequently present in physicians' narratives. Acknowledgment of shortcomings was most common. Acceptance of limitations, openness, and perspective-taking frequently co-occurred. Two key themes emerged: humility allowed physicians to trust their training despite uncertainty, and enabled pivoting and adapting to new information.

Conclusion: Findings suggest humility facilitates managing uncertainty by promoting trust in abilities and enabling flexibility and openness. There are opportunities in undergraduate medical education to include formal training and specific skills development in humility to prepare learners to navigate clinical uncertainty. Further research should explore nuances of humility across clinical situations and types of uncertainty.

22 Personality Traits and Burnout in Emergency Medicine Residents

Brendan Freeman, Lukasz Cygan, Laura Melville, Theodore Gaeta

Background: Burnout is prevalent in medical training. The gold-standard for measurement of burnout is the Maslach Burnout Inventory (MBI), which is a questionnaire that scores three factors: emotional exhaustion (EE), depersonalization

(DP), and personal accomplishment (PA). EE is most closely correlated with burnout. Studies have shown a link between certain personality traits and burnout markers, but this has not been evaluated in emergency medicine residents. The personality traits openness, agreeableness, extraversion, conscientiousness, and neuroticism can be measured with a 50-item International Personality Item Pool (IPIP) Big 5 survey.

Objectives: To evaluate the association between personality traits and self-reported burnout in emergency medicine residents.

Methods: Observational, cross-sectional study in an urban, level II trauma center, three-year residency program. Participants were emergency medicine residents. Convenience sampling performed via survey. Subjects were consented and administered two sequential online surveys, the IPIP and MBI, over a secure website with anonymity. Raw/mean scores and standard deviations were calculated for each personality trait/burnout measure and compared by Pearson correlation coefficient. This study received IRB approval.

Results: We achieved 100% resident participation (n = 38). Thirty-one percent of the cohort reported high exhaustion, 13% had high depersonalization and 42% had low professional accomplishment. Two of 38 (5%) residents reported the combination of high EE, high DP and low PA. There was a negative correlation between conscientiousness, openness and agreeableness and emotional exhaustion, however only conscientiousness was statistically significant (Pearson's $r = -0.40, p = .01$).

Conclusions: In our sample, residents who were more conscientious had lower levels of emotional exhaustion. Programs may consider assessing their resident's personality traits to identify predictors of burnout.

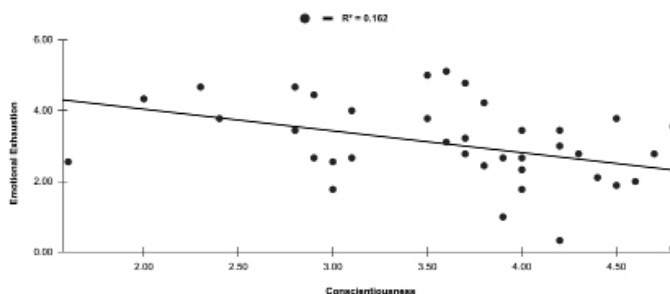


Figure 1. Negative correlation between conscientiousness and emotional exhaustion.

23 Changes in Imposter Syndrome During Intern Year of Emergency Medicine Residency

April Choi, Jeremiah Ojha, Linda Regan

Background: Imposter syndrome (IS) affects residents, causes burnout, and is difficult to overcome alone. Residency programs should be aware of when residents experience IS