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s.haring made them feel worse; the remainder indicated positive impact. All participants indicated they felt hearing other's stories would help with feelings of burnout with 9/10 indicating that hearing the stories indeed helped with their sense of burnout/isolation.

**Conclusions:** Anonymous sharing of peer experiences in residency may assist in alleviating residents' sense of burnout and isolation as indicated by their post-sharing assessments and post-reading evaluations. Additional sessions will be held in the future to obtain more data regarding the effects of sharing narratives.

## 14 Change in Resuscitation-Specific Confidence and Anxiety Levels in Residents From a Novel Rotation

*Epley C, Berger D, Purekar M, Sawyer K, Burla M, Chen N / Beaumont Health; University of Pittsburgh Medical Center*

**Background:** The Resuscitation Rotation (RR) is a novel month long PGY2 rotation focusing on the highest acuity of patients in EM.

**Objective:** We performed a survey of EM PGY2 residents regarding their RR experience at a single tertiary care center and analyzed pre-post (PP) responses regarding self-assessment of confidence and anxiety.

**Methods:** Residents were anonymously and voluntarily surveyed over a three year period with a PP RR survey. Five Likert scale questions, including three measuring confidence and two measuring anxiety, were compared. Higher Likert scale levels indicated higher levels of confidence or anxiety. Non-paired descriptive analyses were performed using frequencies and percentage. To account for unbalanced cohorts and the anonymity of the surveys, post outcomes were tested independently against an ad hoc benchmark (AHB) using exact binomial proportion one-sided tests.

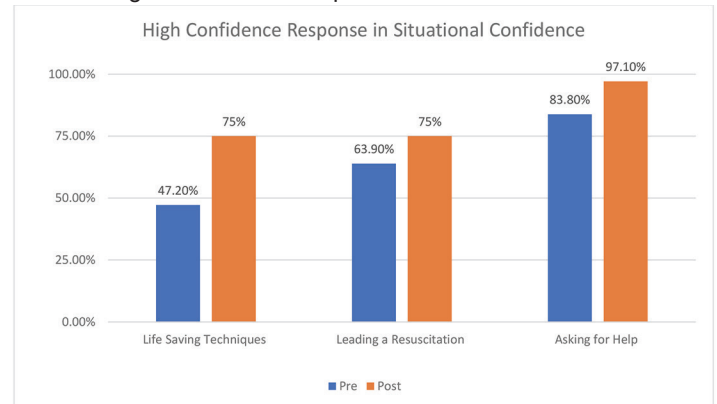
**Results:** A total of 36 and 25 residents completed surveys before and after the RR, respectively. PP levels of high confidence were as follows; increased from 47.2% to 76% for life saving techniques (LST) increased from 63.9% to 75% for leading a resuscitation (LAR) and increased from 83.3% to 97.1% for knowing when to ask for help (AFH). PP levels of low anxiety were as follows: increased from 77.8 to 95.8% for recognizing different dysrhythmias (RDD) and decreased from 100% to 96% for endotracheal intubations (ETI).

When compared against AHB of 50% high confidence, LST ( $p=0.01$ ) and LAR ( $p=0.01$ ) were statistically significant. When compared against AHB of 75%, AFH ( $p=0.04$ ) was statistically significant. When compared against AHB of 80%, lower anxiety of RDD ( $p=0.03$ ) was statistically significant and ETI was not.

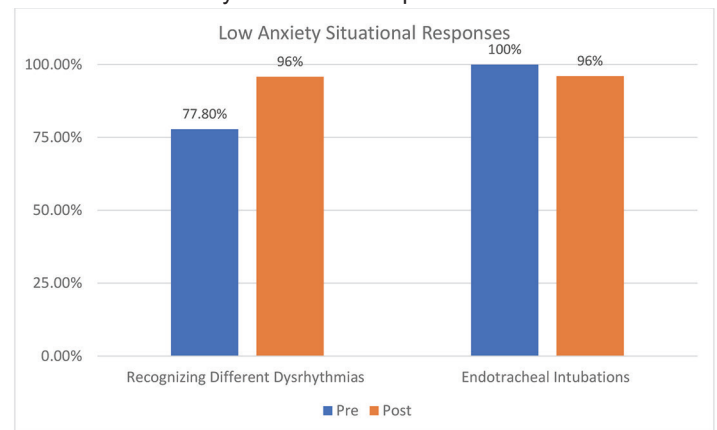
**Conclusions:** The data demonstrates that PGY2 EM residents have significant improvement in their confidence in life

saving techniques, leading a resuscitation, and asking for help; as well as their anxiety in recognizing different dysrhythmias.

**Table 1.** High Confidence Response in Situational Confidence.



**Table 2.** Low Anxiety Situational Responses



## 15 Chief Resident Selection Method by United States Emergency Medicine Residency Programs

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**Background:** The position of chief resident (CR) has been long established in academic medicine. The role of CR has historically been viewed as a high honor as well as a stepping stone into a successful career. The Emergency Medicine (EM) CR role is not a position obtained simply by being in the final year of training, as it is in some other specialties. Previous studies have looked at input regarding CR selection, they have not evaluated how residents were selected.

**Objective:** Determine the percentage of elected vs appointed CR selection in United States EM residency programs.

**Methods:** On December 11, 2018, we compiled a list of all