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Do Incoming Residents Vary in Measures of Emotional Status Even Prior to Residency Training?

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STUDY OBJECTIVES

The emotional status of medical professionals has received attention recently with concerns expressed over troubling scores on measures of dissatisfaction and burnout, and low levels on measures of empathy. However, there are few data on whether any differences by specialty are seen even prior to the start of residency. The purpose of this prospective, cross-sectional study was to determine whether Empathy, Emotional Intelligence, and Burnout scores differ by specialty in incoming residents.

METHODS

Three previously validated survey instruments, the Jefferson Scale of Physician Empathy, Maslach Burnout Inventory, and the Emotional and Social Competency Inventory (ESCI), were written into a survey platform as a single 125-question survey. During June 2015, 2016, and 2017, incoming residents at our 1100 bed hospital network were emailed an explanation of the study with a link to the survey, which they completed at the hospital orientation. Residents were grouped by incoming specialty. Anonymity was assured.

RESULTS

The number of entering first year residents surveyed included: Emergency Medicine (EM) (42), Internal Medicine (IM) (53), Pediatrics (Peds) (17), Surgery (22), Family Medicine (FM) (19), OB/GYN (18), Dental (21), and Transitional (Tr) (30). When comparing other specialties to EM, FM had a higher Empathy score (127) than EM (115); p<0.05. There were no differences between other specialties and EM on any of the three components of the Maslach Burnout Scale (Emotional Exhaustion, Depersonalization, and Personal Accomplishment). There was no difference in Emotional Exhaustion scores between specialties, and for all but Tr interns, a majority fell into the low subcategory for Emotional Exhaustion (EM: 69%, Surgery: 73%, FM: 74%, Peds 71%, IM 55%, OB/GYN: 61%, Dental: 71%, Tr: 47%). Importantly, in all specialties, there were incoming residents who scored in the high subcategory for Emotional Exhaustion (EM: 10%, Surgery: 9%, FM: 6%, Peds: 18%, IM: 23%, OB/GYN: 17%, Dental: 14%, Tr: 37%). There was a difference in

Depersonalization (score range 0-30) when comparing all specialties (p=0.04), with EM scoring highest (7) and FM lowest (2), and 71% of FM and 38% of EM scored in the low subcategory. There was also a difference in level of Personal Accomplishment (score range 0-48 where a higher score is better), with Peds scoring highest (45) and IM lowest (38), and 82% of Peds and 42% of IM scoring in the low subcategory; (p=0.01). There were no differences in any of the 12 ESCI competencies between specialties.

CONCLUSION

Differences in measures of emotional wellbeing across specialties exist, even prior to the start of residency training. Recruits to every specialty include significant numbers of incoming residents that appear to merit specialized attention.

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