

Background

Strides in resident education have been made in the last decade to create a more hospitable learning environment. Changes include more dedicated education time, mentorship, simulation, and incorporation of wellness programs, among others. However, mistreatment and humiliation still occur in medical training.¹⁻³ The operating room (OR) is often perceived as a fast-paced, high-pressure environment for learners and is a location in which learner mistreatment takes place.

Psychological safety (the belief that team members are protected from humiliation and backlash if they express ideas, concerns, and voice questions⁴) is essential in the OR in order to have effective communication and reduce adverse outcomes.⁵ Psychological safety also has a large impact on resident physician satisfaction.⁶

This project sought to create a curriculum that prepares Obstetrics and Gynecology interns for the OR in a safe learning environment in order to reduce threats to psychological safety.

Methods

Sessions were designed for hands-on learning and group discussion. Each meeting started with a brief slide presentation of anatomy, instruments, and surgery steps, followed by an interactive portion where learners practiced with instruments. This structure was open format and allowed ample time for asking questions. Sessions were facilitated by a single PGY-3 in a location not otherwise used for educational purposes to reduce concern about academic performance.

References:

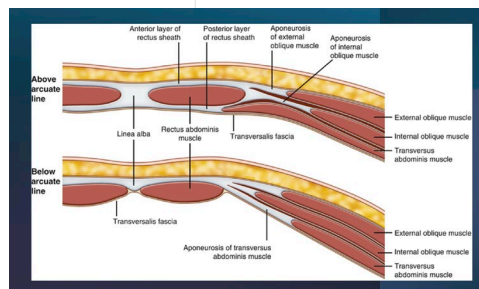
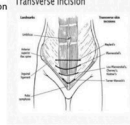
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Incision Types



TRANSVERSE INCISION

Pfannenstiel incision
Maylard incision
Kustner incision
Cherney incision



Images 1-3: Example session slides

Surveys were then completed by participants. Survey responses were qualitative statements regarding feelings about entering the OR prior to and after participation in the curriculum, opinions about the strongest aspects of the sessions, and suggestions for improvements.

Results

Examples of survey responses included:

1. "I was feeling nervous and intimidated by the idea of working in the OR and not being prepared to be helpful right away and not meeting expectations."... "I feel more prepared after the sessions... I especially feel that the emphasis on the most commonly used instruments and sutures were very helpful to make it easy to remember and apply these concepts on day 1 in the OR"
2. "The small group as well as only including learners made it feel more comfortable and low stakes"
3. I liked "the safe and private environment of other interns"

Conclusion

Small group, active learning sessions led by a facilitator close in learner level is one way to combat threats to psychological safety for interns in the OR. Feedback from participants has shown that this is a worthwhile opportunity for learners.

Challenges:

- Time constraint of residency
- Finding more session leaders

Next Steps:

- Resurvey at 6 months and 1 year of residency
- Sessions on more advanced techniques including fundamentals of laparoscopy, hysterectomy routes and steps, and introduction to subspecialist techniques
- Implementation of surgical coaching into the curriculum

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