



SRF SECTION FOR RESIDENTS AND FELLOWS-IN-TRAINING

2018 SRF Annual Survey

Section for Residents and Fellows-in-Training (SRF)
American Academy of Otolaryngology-Head and Neck Surgery

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Introduction

The SRF Governing Council has conducted an annual survey of all residents and fellows in training for the past 17 years. The SRF Vice-Chair is responsible for the planning, execution and analysis of the survey for that year. The survey is comprised of two sections, the first is termed the core section, and collects longitudinal data that has remained fairly stable over the years, while the second focuses on a topic of interest that varies every year. This year we aimed to learn more about the Emotional Intelligence of Otolaryngology Residents using the Trait Emotional Intelligence Questionnaire – Short Form (TEIQue-SF).

We appreciate the continuous support from the Academy in endorsing us in this effort. We believe it provides valuable information about our constituents and their needs, which benefits our section and the Academy as a whole. We are proud to share the results of the 2018 SRF Survey with you.

Methods

The survey instrument was designed in RedCap using information from prior surveys and the TEIQue-SF. Approval was obtained from the AAOHNS Executive Committee. IRB exemption was obtained from the University of Arkansas for Medical Sciences Institutional Review Board. The survey was then distributed with a cover letter to all residents and fellows in training through Academy emails, emails to the resident program representatives, facebook and ENT Connect.

Results

There were 520 survey respondents, of 1655 SRF members of the Academy in 2018, for a response rate of 31.4%.

Section 1: Core Questions

	n (%)
1. What is your age in years?	
Mean (SD)	30.1 (2.6)

Median (IQR) 30.0 (28, 31)
 (Range) (25, 44)

2. What is your gender identity?

Male 288 (55.5)
 Female 226 (43.5)
 Prefer not to respond 5 (1.0)

3. What is your current level of training as of June 2018?

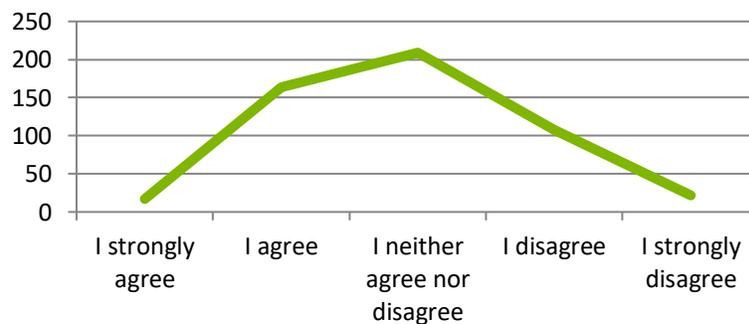
PGY1 85 (16.3)
 PGY2 94 (18.1)
 PGY3 113 (21.7)
 PGY4 145 (27.9)
 PGY5 40 (7.7)
 PGY6 or greater (Resident) 7 (1.3)
 Fellow 36 (6.9)

4. Please select the region in which you live.

New England (CT, MA, ME, NH, RI, VT) 35 (6.7)
 Mid Atlantic (DC, DE, MD, NJ, NY, PA, VA, WV) 124 (23.8)
 South Atlantic (AL, FL, GA, MS, NC, SC, TN) 58 (11.2)
 South Central (AR, LA, MS, OK, TX) 52 (10.0)
 Midwest - East (IL, IN, KY, MI, OH, WI) 112 (21.5)
 Midwest - West (IA, KS, MN, MO, ND, NE, SD) 52 (10.0)
 Mountain (AZ, CO, ID, MT, NM, NV, UT, WY) 29 (5.6)
 Pacific (CA, HI, OR, WA, AK) 58 (11.2)

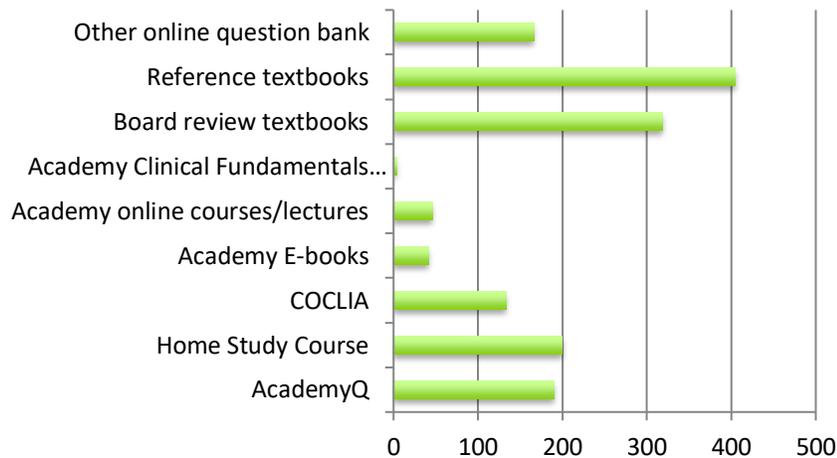
5. Please rate your agreement with the following statement: "The Otolaryngology Training Exam ("in-service") is representative of what residents should know about our specialty and has questions that are up to date with current knowledge"

I strongly agree 17 (3.3)
 I agree 164 (31.5)
 I neither agree nor disagree 209 (40.2)
 I disagree 108 (20.8)
 I strongly disagree 22 (4.2)



6. What materials do you use to prepare for the Otolaryngology Training Exam ("in-service")? Check all

<i>AcademyQ</i>	190 (36.5)
<i>Home Study Course</i>	200 (38.5)
<i>COCLIA</i>	133 (25.6)
<i>Academy E-books</i>	42 (8.1)
<i>Academy online courses/lectures</i>	46 (8.8)
<i>Academy Clinical Fundamentals series</i>	4 (0.8)
<i>Board review textbooks</i>	319 (61.3)
<i>Reference textbooks</i>	405 (77.9)
<i>Other online question bank</i>	166 (56.5)



7. The AAO-HNS/F has Clinical Practice Guidelines (CPGs) and Clinical Consensus Statements (CCS) regarding the management of many Otolaryngology conditions. How frequently have you accessed these guidelines or statements (for any condition) in the last year?

<i>Never</i>	53 (10.2)
<i>1-2 times</i>	170 (32.7)
<i>3-5 times</i>	165 (31.7)
<i>Frequently (>5 times)</i>	132 (25.4)

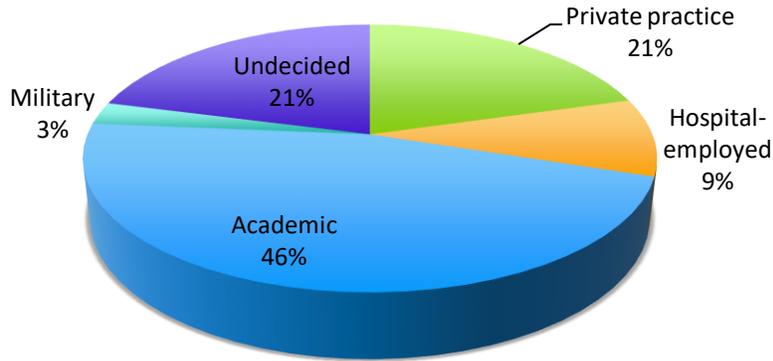
8. What method(s) does your program currently use for the transfer of care for patients ("signout" or "checkout")? Check all that apply

<i>Phone call discussion between covering residents</i>	418 (80.4)
<i>Face to face meeting between covering residents</i>	364 (70.0)
<i>Face to face meeting with bedside evaluation of critical patients</i>	166 (31.9)
<i>Direct in-person faculty supervision of the transfer process between residents</i>	12 (2.3)

<i>Maintenance of an "electronic list" of patients for each transfer of care, including pertinent patient condition information and a "to do" list</i>	390 (75.0)
<i>Other electronic or email discussion between covering residents</i>	273 (52.5)
<i>Other electronic or email discussion between covering residents and faculty</i>	158 (30.4)

9. What practice setting do you currently plan to pursue?

<i>Private practice</i>	107 (20.6)
<i>Hospital-employed</i>	49 (9.4)
<i>Academic</i>	241 (46.3)
<i>Military</i>	14 (2.7)
<i>Undecided</i>	109 (21.0)

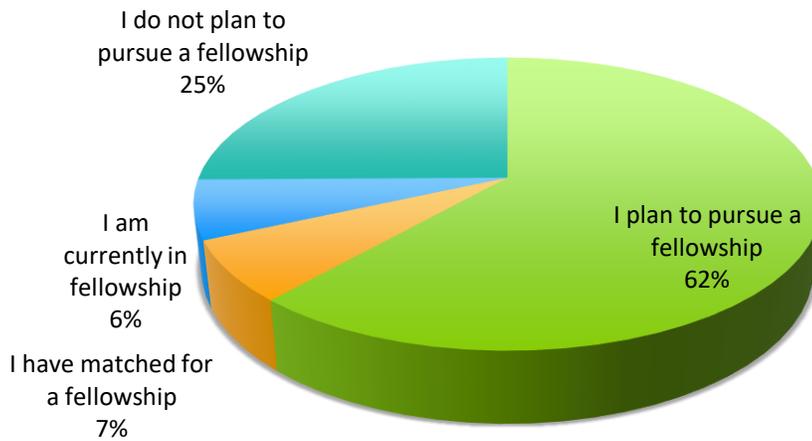


10. What is your total current educational debt?

<i>No debt</i>	151 (30.0)
<i>\$50,000-\$100,000</i>	42 (8.3)
<i>\$101,000-\$150,000</i>	41 (8.1)
<i>\$151,000-\$200,000</i>	53 (10.5)
<i>\$201,000-\$250,000</i>	76 (15.1)
<i>\$250,000-\$400,000</i>	110 (21.8)
<i>>\$400,000</i>	31 (6.2)

11. What are your plans regarding a fellowship?

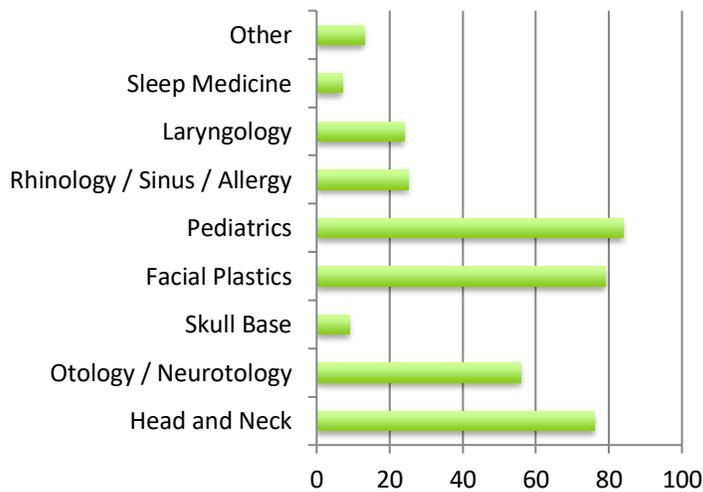
<i>I plan to pursue a fellowship</i>	320 (61.5)
<i>I have matched for a fellowship</i>	35 (6.7)
<i>I am currently in fellowship</i>	34 (6.5)
<i>I do not plan to pursue a fellowship</i>	131 (25.2)



12. If you plan to pursue or are already in a fellowship, please identify your subspecialty choice. Check all that apply.

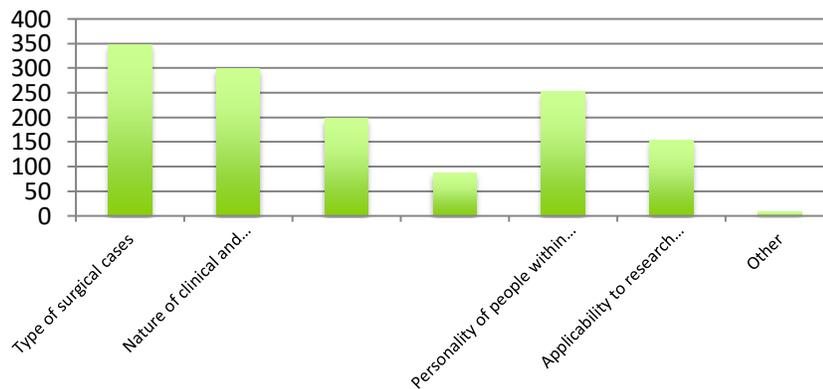
<i>Head and Neck</i>	76 (20.4)
<i>Otology / Neurotology</i>	56 (15.0)
<i>Skull Base</i>	9 (2.4)
<i>Facial Plastics</i>	79 (21.2)
<i>Pediatrics</i>	84 (22.5)
<i>Rhinology / Sinus / Allergy</i>	25 (6.7)
<i>Laryngology</i>	24 (6.4)
<i>Sleep Medicine</i>	7 (1.9)
<i>Other</i>	13 (3.5)

For people who marked "Other", two people are planning to do 2 fellowships (Head & Neck and Skull Base Surgery; Head & Neck, and Pediatrics), one person was planning to do a T-32 funded year, while the others were undecided.



13. What are the most important factor(s) in determining which fellowship you decide(d) to pursue? Check all that apply.

<i>Type of surgical cases</i>	348 (66.9)
<i>Nature of clinical and medical problems</i>	299 (57.5)
<i>Lifestyle</i>	199 (38.3)
<i>Financial considerations</i>	87 (16.7)
<i>Personality of people within the subspecialty</i>	252 (48.5)
<i>Applicability to research interests</i>	154 (29.6)
<i>Other</i>	8 (1.5)



14. Did you take any leave during residency or fellowship?

<i>Yes, to have children (maternity or paternity leave)</i>	26 (5.0)
<i>Yes, for other reasons (personal injury, physical illness, mental illness, family emergency, other)</i>	11 (2.1)
<i>No</i>	483 (92.9)

15. How do you feel about other residents or fellows taking family leave during training?

<i>No one has taken family leave while I've been a resident</i>	149 (28.7)
<i>Not a problem</i>	156 (30.0)
<i>Tough, but we made it work</i>	180 (34.6)
<i>It was a big problem</i>	6 (1.2)
<i>Variable, it depended on the individual resident taking family leave</i>	29 (5.6)

16. When you transition out of residency/fellowship and into practice, do you anticipate continuing involvement with the AAO-HNS beyond dues? (e.g., committee participation, advocacy efforts, etc)

<i>Yes</i>	398 (76.5)
<i>No</i>	122 (23.5)

17. How much dedicated research time do you have during your residency or fellowship?

<i>None</i>	22 (4.2)
<i>1-3 months</i>	243 (46.7)
<i>4-6 months</i>	218 (41.9)

More than 6 months 37 (7.1)

18. During residency or fellowship, how many publications and active research projects that you plan to publish do you have? (Include publications during residency only and active projects such as retrospective reviews, case reports, etc., that you are planning to publish before graduating from

mean (SD) 5.4 (4.7)
median (IQR)(range) 4.0 (2, 7)
 (0, 40)

19. Does your program pay for attendance at meetings, such as the AAO-HNS/F Annual Meeting and OTO E

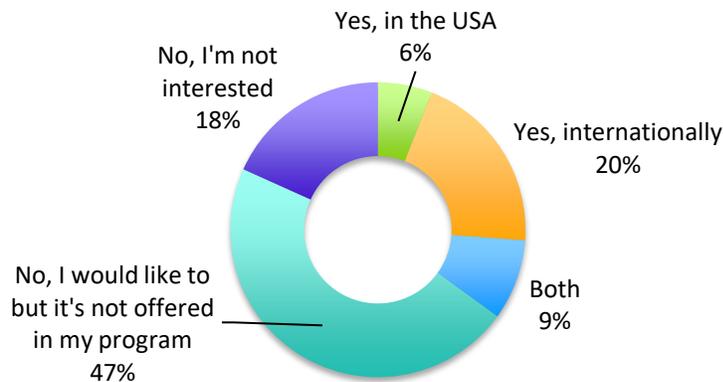
Yes 98 (18.9)
Yes, if I present an oral presentation 90 (17.3)
Yes, if I present an oral or poster presentation 308 (59.3)
No 23 (4.4)

20. How would you describe your department's financial support for residents or fellows for educational resources (such as textbooks, digital/electronic resources, etc.) equipment, subscriptions, meeting attendance, research presentations, etc.?

Very strong support 202 (38.8)
Some support 255 (49.0)
Inadequate support 55 (10.6)
No support 8 (1.5)

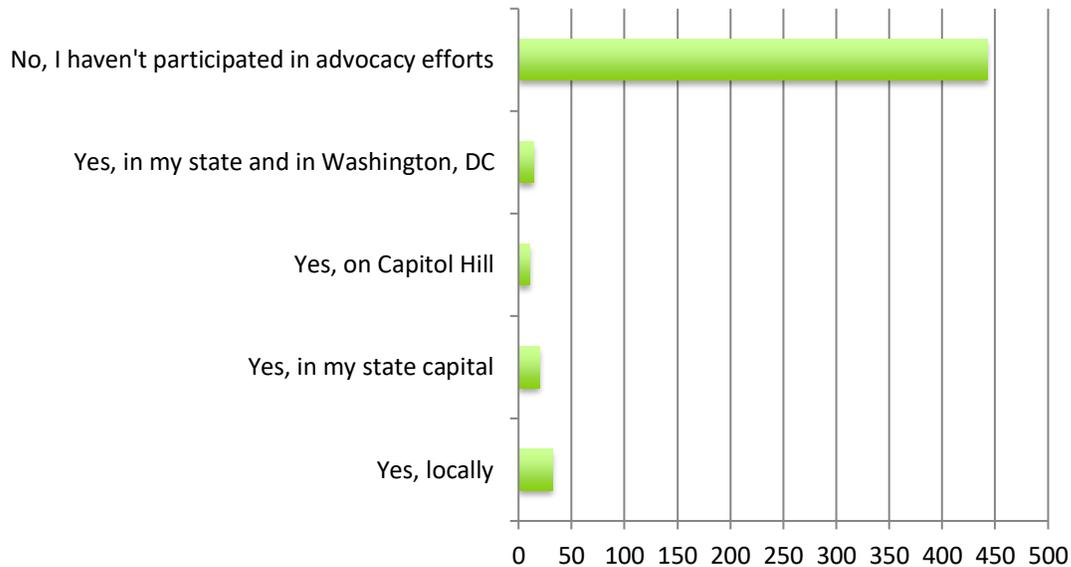
21. Have you taken time to participate in humanitarian efforts, either within or outside of the USA?

Yes, in the USA 31 (6.0)
Yes, internationally 105 (20.2)
Both 46 (8.8)
No, I would like to but it's not offered in my program 243 (46.7)
No, I'm not interested 95 (18.3)



22. Have you ever participated in advocacy efforts at the local, state, and/or federal levels on behalf of otolaryngology and/or medicine in general?

<i>Yes, locally</i>	32 (6.2)
<i>Yes, in my state capital</i>	20 (3.8)
<i>Yes, on Capitol Hill</i>	11 (2.1)
<i>Yes, in my state and in Washington, DC</i>	14 (2.7)
<i>No, I haven't participated in advocacy efforts</i>	443 (85.2)



23. Please indicate your exposure to the following basic management principles:

	<i>Not enough training</i>	<i>An appropriate amount of training</i>	<i>Too much training</i>
<i>Outpatient EMR</i>	19 (3.7)	445 (85.6)	56 (10.8)
<i>ICD9/ICD10/CPT coding and coding compliance</i>	345 (66.3)	167 (32.1)	8 (1.5)
<i>Determining the level of service for an encounter</i>	291 (56.0)	223 (42.9)	6 (1.2)
<i>Managed care contracting (i.e., negotiating a contract)</i>	445 (85.6)	71 (13.7)	4 (0.8)
<i>Personnel management</i>	389 (74.8)	125 (24.0)	6 (1.2)
<i>Requirements for demonstrating/documenting performance in practice (Including requirements and resources for continuing medical education and maintenance of certification)</i>	325 (62.5)	184 (35.4)	11 (2.1)
<i>Awareness of local, state, and federal legislative/regulatory processes on medical practice and/or Otolaryngology?</i>	385 (74.2)	130 (25.0)	4 (0.8)

Section 2: TEIQue-SF

The Trait Emotional Intelligence Questionnaire - Short Form (TEIQue-SF) is a self-assessment tool to measure emotional intelligence. It evaluates a global trait emotional intelligence (trait EI), and four distinct, but interrelated, dimensions: Well-being, Self-control, Emotionality, and Sociability. Items are responded on a 7-point Likert scale, and graded in a continuum where the higher the score, the higher the trait emotional intelligence of the individual.

Instructions provided with the survey:

Please answer each statement below by selecting the number that best reflects your degree of agreement or disagreement with that statement. Do not think too long about the exact meaning of the statements. Work quickly and try to answer as accurately as possible. There are no right or wrong answers. There are seven possible responses to each statement ranging from 'Completely Disagree' (number 1) to 'Completely Agree' (number 7).

TEIQue-SF Trait Emotional Intelligence (Total)	<i>mean (SD)</i>	5.2 (0.6)
TEIQue-SF Well-being subscale	<i>mean (SD)</i>	5.7 (0.8)
TEIQue-SF Self-control subscale	<i>mean (SD)</i>	5.1 (0.7)
TEIQue-SF Emotionality subscale	<i>mean (SD)</i>	5.5 (0.7)
TEIQue-SF Sociability subscale	<i>mean (SD)</i>	4.9 (0.8)

