

### Decision Making, Communication, and Professionalism: Does the Service Environment Matter?



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**INTRODUCTION:** The clinical learning environment review emphasizes evolving the graduate medical education paradigm to promote patient safety, improve health care quality, and enhance resident wellness. Existing coaching efforts have concentrated on technical aspects of specific surgical procedures. We expanded the coaching model to enhance residents' communication skills and capacity at providing patient- and family-centered care. Communication barriers include time constraints, distractions, conflicting demands, burnout, and apathy. Learning about ethics, professionalism, and effective communication occurs through positive role modeling. This varies dramatically between rotations.

**METHODS:** During 3 years, residents participated in one-to-one coaching focusing on patient-communication skills and professionalism. They were observed on a minimum of 2 services for multiple days. The structured observation tool used focused on providing feedback that could be useful to residents across multiple rotations and clinical scenarios. Observations were coded to evaluate variance across settings.

**RESULTS:** Resident behavior is modified by the current surgical service rotation. Resident engagement in patient communication was highly variable due to time demands and residents' perception of faculty expectations. Increased demands resulted in decreased listening behavior, defensive communication, and decreased resident ability to manage personal anxiety. During feedback sessions, some residents demonstrated clear insight supporting improvement in their conduct. Others lacked self-awareness of this behavior that was incongruous with their general character and core values.

**CONCLUSIONS:** Resident-patient interactions may be directly related to the service on which they are rotating. Further observations are necessary to elucidate the role of focused coaching in changing resident behavior in a consistent manner that addresses significant variations in rotation environments.

### Gender Bias in Letters of Recommendation for Urology Residency Applicants



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**INTRODUCTION:** Though changing, urology continues to be a male-dominated specialty. Multiple factors may contribute to the under-representation of women in urology. To determine whether implicit gender bias exists during the urology residency application process, we compared linguistic differences in letters of recommendation (LORs) submitted for male and female applicants.

**METHODS:** From applications submitted to our urology residency program for the 2016 to 2017 application cycle, we abstracted LORs written by practicing urologists in the US. To characterize linguistic patterns, we used a validated text analysis software program: Linguistic Inquiry and Word Count 2015. Analyzed LORs were compared according to gender of the applicant and letter author using 2-sided Student's *t*-test.

**RESULTS:** A total of 243 males and 110 females applied to our residency program. Of 460 LORs analyzed, 420 were written by male urologists and 40 by female urologists. When stratified by gender of letter author, LORs written about male and female applicants contained significant differences in linguistic styles. LORs for male applicants written by male urologists were written in a more analytical and authentic tone, and less emotional tone, compared to letters written for female applicants. Letters written for male applicants contained significantly more references to personal drive and work than letters written for female applicants. These differences were not observed on analysis of LORs written by women urologists (Table).

Table.

Letter characteristics	Male applicant, mean (SD)	Female applicant, mean (SD)	p Value
Male letter writers			
Words per letter	358 (140)	385 (129)	0.05
Analytic voice (/100)	84.8 (9.1)	82.7 (9.4)	0.03
Authenticity (/10)	9.46 (7.9)	7.69 (7.5)	0.03
Emotional tone (/100)	93.3 (8.2)	94.7 (6.0)	0.06
Female letter writers			
Words per letter	360 (87)	358 (110)	0.96
Analytic voice (/100)	87.5 (7.9)	87.4 (8.2)	0.95
Authenticity (/10)	8.88 (6.9)	8.68 (6.4)	0.92
Emotional tone (/100)	92.8 (12.9)	93.1 (6.0)	0.93

**CONCLUSIONS:** Significant linguistic differences exist among LORs written for men and women applying into urology residencies that differ based on gender of letter writer, suggesting that gender bias may permeate this aspect of resident recruitment.

### Patient and Surgeon Insights into Teaching during Awake Surgical Procedures



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**INTRODUCTION:** Surgical procedures on awake patients offer advantages such as shorter recovery times and decreased costs, but raise challenges related to teaching residents while patients are awake. We sought to determine how patients respond to over-hearing resident teaching during awake procedures.