

Interpretation of the Construct of 'Service' and 'Education' for Residents and Faculty in Academic Anesthesiology Residency Programs

I am an:

- Attending Anesthesiologist
- Anesthesia Resident

To what gender identity do you most identify: *select one*

- Female
- Male
- Gender variant/nonconforming
- Transgender female
- Transgender male
- Prefer not to answer
- Other, specify:

To what race do you most identify: *select one*

- American Indian/Alaska Native
- Asian
- Black/African American
- Native Hawaiian or Other Pacific Islander
- White

- More than one race
- Unknown or not reported
- Prefer not to say
- Other, specify:

To what ethnicity do you most identify: *select one*

- Hispanic or Latino
- Not Hispanic or Latino
- Unknown

What is your academic title?

- Instructor
- Assistant Professor
- Associate Professor
- Professor

How many years have you been practicing as an Attending?

- 0-5 years
- >5-10 years
- >10-20 years
- >20 years

Did you attend any part of your medical school, residency or fellowship training outside of the U.S.?

- No
- Yes

What is your current level of Anesthesiology Training?

- CA-0 (PGY-1)
- CA-1 (PGY-2)
- CA-2 (PGY-3)
- CA-3 (PGY-4)
- Fellow (PGY-5/6)

Activities

On a scale from Completely **Service** to Completely **Educational**, how would you rate yourself performing the following activities?

Activities

On a scale from Completely **Service** to Completely **Educational**, how would you characterize the following activities when they are performed by a resident?

Preoperative

	Completely service	Mostly service, but still educational	Equally service & educational	Mostly educational, but still service	Completely educational	NA
Chart review before anesthesia event	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Case discussion between the Attending and Resident prior to Anesthesia Start	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Discussion of Anesthesia Plan with Patient	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transporting patient to OR	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Intra-operative Management

	Completely service	Mostly service, but still educational	Equally service & educational	Mostly educational, but still service	Completely educational	NA
Medical record documentation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation of Routine Airway Management (LMA, ETT)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation of Complex Airway Management	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performance of Invasive Line Placement (Arterial Line, Central Line)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performance of Neuraxial Anesthesia in Obstetric Suite	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Performance of Neuraxial Anesthesia (Outside of Obstetric Suite)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Transporting patient from OR to PACU or ICU	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Calls

	Completely service	Mostly service, but still educational	Equally service & educational	Mostly educational, but still service	Completely educational	NA
Managing patients after 5 pm during Weekdays	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Weekday overnight calls	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Weekend /Holiday calls	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Teaching and Academic Activities

	Completely service	Mostly service, but still educational	Equally service & educational	Mostly educational, but still service	Completely educational	NA
Attending departmental Grand Rounds	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participating in scheduled resident teaching activity	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participation in Mock oral exams	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Attending PBLD sessions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Using simulators in simulation lab	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Teaching medical students & residents	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Completing academic projects required for Residency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Participating in academic projects NOT required for Residency	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Entering case log per ACGME regulation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Entering duty hours per ACGME regulation	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Factors Affecting Clinical Perception

How do the following circumstances affect your perception of an activity as a **Service** vs. as **Education**:

	Activity feels more like a SERVICE	Circumstance DOES NOT change my perception	Activity feels more EDUCATIONAL
Attending Anesthesiologist shows little interest in teaching	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Inadequate level of supervision	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of respect for the Attending Anesthesiologist you work with	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Lack of respect for the anesthesia team by the surgical team	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poor learning environment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling you have excessive case-load during regular work-hours	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long work hours	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling fatigued	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How do the following circumstances affect your perception of an activity as a **Service** vs. as **Education**:

	Activity feels more like a SERVICE	Circumstance DOES NOT change my perception	Activity feels more EDUCATIONAL
Lack of respect for the anesthesia team by the surgical team	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Poor learning environment	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling you have excessive case-load during regular work-hours	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Long work hours	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Feeling fatigued	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

In your opinion, how much of the Resident's time is distributed between **Education** and **Service** at your institution?

- 100% Service
- 75%-25% Service-Education
- 50%-50% Service-Education
- 75%-25% Education-Service
- 100% Education

How satisfied are you with the current balance of **service** and **education** activities for Residents at your institute?

- Very Dissatisfied Dissatisfied Neutral Satisfied Very satisfied

In your opinion, how should a Resident's time be distributed between **Education** and **Service**?

- 100% Service 75%-25% Service-Education 50%-50% Service-Education 75%-25% Education-Service 100% Education

Clinical Scenarios

Scenario A. It is 7 am on a Sunday morning, just as Dr. A, an anesthesia resident, signed off the shift getting ready to go home, an emergency/Level I, ruptured AAA rolled into the OR. An extra pair of hands was needed and Dr. A is asked to stay to help start the case. To what extent do you believe there is educational value in continuing past the shift if Dr. A stays for a few extra hours under one of the situations below?

Dr. A has worked non-stop for the last 24 hours at a busy level I trauma hospital [1=Completely Service; 10= Completely Education]

- 1

- 2
- 3
- 4
- 5
- 6
- 7
- 8
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- 10

The last case for Dr. A finished around 11 pm, and Dr. A was able to sleep 8 hours during the shift *[1=Completely Service; 10= Completely Education]*

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Scenario B. At 4 pm in the afternoon after finishing the last case of the day, Dr. B, an anesthesia resident, was asked to perform preoperative visits to several inpatients whose surgeries are scheduled for the next day. To what extent do you believe there is educational value in this activity considering the following additional circumstances:

None of these patients will be under Dr. B's care tomorrow *[1=Completely Service; 10= Completely Education]*

- 1
- 2
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Only one patient will be in Dr. B's OR tomorrow [1=Completely Service; 10= Completely Education]

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Dr. B is asked to evaluate preoperatively 5 straightforward inpatients that he is scheduled to care for tomorrow [1=Completely Service; 10= Completely Education]

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- 3
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Dr. B is asked to evaluate preoperatively 5 complicated inpatients that he is scheduled to care for tomorrow. However, this could take him another 2 hours. *[1=Completely Service; 10= Completely Education]*

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Scenario C. Dr. C., an anesthesia resident, just finished the last case of the day at 5 pm, when a difficult airway code was called in the emergency room. Dr. C was asked to go to the code with the attending anesthesiologist. To what extent do you believe there is educational value in this activity? *[1=Completely Service; 10= Completely Education]*

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Scenario D. Dr. D., an anesthesia resident, is currently in pediatric anesthesia rotation and is on call for pediatric anesthesia today. There are no cases in the pediatric operating rooms, and Dr. D is asked to help in the adult OR. To what extent do you believe there is educational value in this activity under one of the situations below?

The main OR is busy with routine cases backed up from the day such as lap. appendectomy, TAH/BSO [1=Completely Service; 10= Completely Education]

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The main OR is busy with rare and challenging cases such as chest trauma with ruptured esophagus, MVA with injury to liver and spleen with massive active bleeding [1=Completely Service; 10= Completely Education]

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Scenario E. On the first day on OB anesthesia rotation, Dr. E., a junior resident, was told to set up the OR for a caesarian delivery, but the attending performed the spinal anesthesia while explaining the procedure in detail. However, Dr. E. was only allowed to “watch and listen” without putting sterile gloves on. To what extent do you believe there is educational value in these activities? *[1=Completely Service; 10= Completely Education]*

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Scenario F. During a cardiac anesthesia rotation, the anesthesia resident Dr. F came in early to set up the operating room with all the infusions instructed by the attending anesthesiologist. He was allowed two attempts at arterial line placement and two attempts at central line placement, and both were taken over by the attending within 5-10 mins. What is the educational value of these activities considering one of the additional factors below?

The cardiac surgeon is pacing around in the OR *[1=Completely Service; 10= Completely Education]*

- 1
- 2
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The patient is unstable [*1=Completely Service; 10= Completely Education*]

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