

Introduction

There is evidence showcasing the teachability of empathy across various professions through diverse instructional approaches.

Emergency Medicine Residency & Empathy

Prior studies have underscored the significance of empathy among emergency medicine residents and providers.

The prospect of enhancing empathy through a streamlined educational method that calls for minimal time and financial investment holds significant potential for impact.

Background

- In a paradigm of physician performance both "cognitive" and "noncognitive" components contribute to the performance of physicians-in-training and in-practice (Hojat et al., 2013).
- The search for personality attributes and physician roles are pertinent to medical education and the practice of medicine and should be a priority in the research agenda for medical education (Hojat et al., 2013).
- 14 personality instruments have been identified to help aid in predicting academic and professional performances, including the Jefferson Scale of Empathy (Hojat et al., 2013).
- Previous studies have found a strong correlation between patient perception of attending empathy and patient perception of resident empathy, indicating a synergistic effect (Kirby et al., 2021).

SCAN TO VIEW
The Jefferson
Scale of
Empathy



Table 1. Selected personality instruments used in medical education research.

Most frequently used

- Measurement of the Five Factors of Personality (NEO PI-R)
- The 16 Personality Factor Questionnaire (16PF)
- The California Psychological Inventory (CPI)
- The Myers Briggs Type Indicator (MBTI)
- The Jefferson Scale of Empathy (JSE)

Other selected instruments

- The Eysenck Personality Inventory (EPI)
- The Minnesota Multiphasic Personality Inventory (MMPI)
- The Profile of Moods State (POMS)
- The Temperament and Character Inventory (TCI)
- The Personal Qualities Assessment (PQA)
- The Maslach Burnout Inventory (MBI)
- The Medical Specialty Preference Inventory (MSPI)
- The Jefferson Scale of Attitudes toward Physician-Nurse Collaboration
- The Jefferson Scale of Physician Lifelong Learning

Purpose

The purpose of this study is to:

Examine the impact of an Empathetic Pedagogy on team-based learning instructional strategies among emergency medicine residents.
Using the Jefferson Scale of Empathy for healthcare professionals, individual scores will be assessed before and after learning strategies are completed.

Methods

- 45 EM residents at 2 sites in the U.S. (John Peter Smith and Johns Hopkins Hospital Emergency Medicine Departments) will be recruited to participate.
- The resident physicians will be divided into five team-based learning groups of nine members.
- Empathy scores will be obtained from all participants at the start of the study period using the JSE-Health Professional Version to measure provider empathy.
- Three empathy based educational sessions will occur monthly across three consecutive months from April 2024 to June 2024.
- Each session will occur for one hour in length during resident didactics.
- Empathy scores will again be obtained from all participants at completion of the empathy based educational sessions.

Empathy Circle

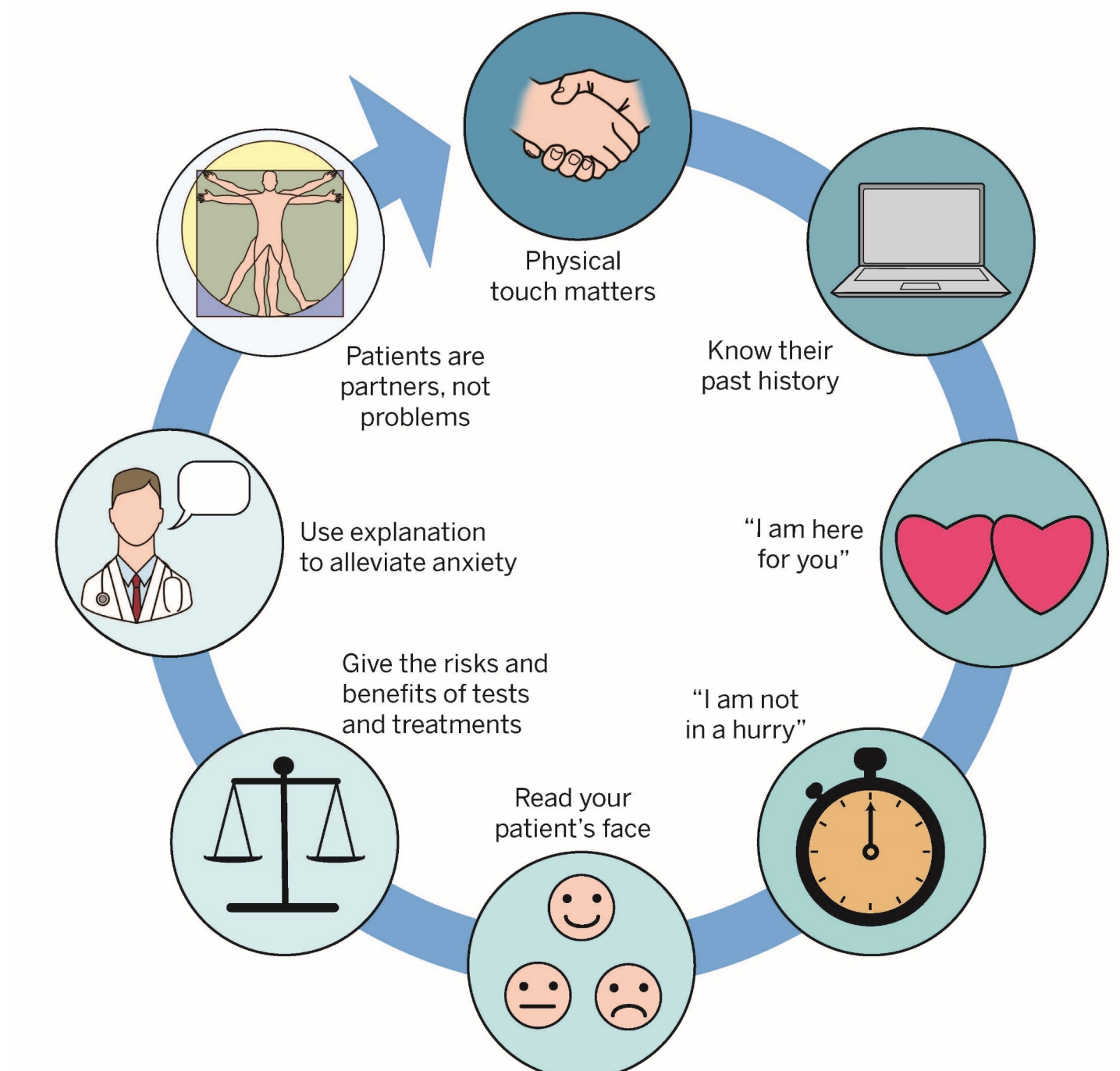


Figure 1
Empathy circle: the cognitive map of the training course (used with permission from SAEM and Wiley Publishing company).

Discussion

- It is essential to consider the link between nurturing empathy and one's professional identity formation (Zhou et al., 2021).
- This foregrounds the need for more effective pedagogic tools to teach empathy and to better understand its role in longitudinal and portfolio based learning programs (Zhou et al., 2021).
- Future directions include studies to subjectively assess and record resident and physician behaviors reflective of the **Empathy Circle** above (Pettit, et al. 2021).
- Our study is currently under IRB review and we look forward to collecting, analyzing and reporting results.

Contact Information

Naomi Alanis, MS, MHA, MBA naomi.alanis@tcu.edu

References

- Hojat, M., Erdmann J.B. & Gonnellak, J. (2013). Personality assessments and outcomes in medical education on the practice of medicine. *AMEE Guide No. 79, Medical Teacher*, 35(7), 1267-1301
- Kirby, R., Knowles, H.C., Patel, A., Alanis, N., Rice, C., d'Etienne, J.P., Schrader, C.D., Zenarosa, N. & Wang, H. (2021) The influence of patient perception of physician empathy on patient satisfaction among attending physicians working with residents in an emergent care setting. *Health SciRep*. 2021;4: e337. <https://doi.org/10.1002/hsr2.337>
- Pettit, K.E., Messman, A., Scott, N., Puskarich, M.A., Wang, H., Alanis, N., Dehon, E., Konrath, S. & Kline, J.A., (2021). Multi-institutional intervention to improve patient perception of empathy in emergency care. *Emergency Medicine Journal : EMJ*, 39(6), 420-426. <https://doi.org/10.1136/emered-2020-210757>
- Zhou, Y.C., Tan, S., Tan, C., Ng, M., Lim, K., Tan, L., Ong, Y. & Krishna, L.K. (2021). A systematic scoping review of approaches to teaching and assessing empathy in medicine. *BMC Medical Education*, 21(292). <https://doi.org/10.1186/s12909-021-02697-6>

Three Roles of a Physician			
Three Elements of Performance	Clinician	Educator	Manager
Knowledge	<ul style="list-style-type: none"> Knows biophysical and psychological factors in health & illness. Knows appropriate diagnostic and therapeutic procedures. Knows associated risk factor in different stages of diseases. 	<ul style="list-style-type: none"> Knows effective teaching strategies to educate patient and physicians-in-training. Knows patients cultural values and belief system to convince patient. Knows approaches to enhance compliance. 	<ul style="list-style-type: none"> Knows available resources to help patient. Knows economic, legal, and ethical ramifications of medical practice. Knows method to render optimal care with minimum cost and maximum benefit.
Technological/Procedural Skills	<ul style="list-style-type: none"> Acquires skills in collecting relevant patient history data. Acquires manual skills, interprets medical test results, makes early and accurate diagnosis, proposes/performs appropriate treatment plans Recognizes risk factors 	<ul style="list-style-type: none"> Acquires skills in applying principles of learning and reinforcement. Teaches effectively to assure understanding of rationale for treatment, expected outcomes, and potential risks. Acquires lifelong learning skills to improve clinical and academic education. 	<ul style="list-style-type: none"> Uses human and technical resources prudently. Manages to obtain essential data for clinical decisions. Refers effectively for consultation, and necessary diagnostic tests, procedures and therapeutic intervention.
Personality	<ul style="list-style-type: none"> Empathic engagement in patient care, showing sensitivity and compassion. Conscientiousness features: competence, dutiful, self-discipline, deliberate, and achievement striving. Adheres to professional standards and ethics. 	<ul style="list-style-type: none"> Flexible teaching styles layered to different patients. Educational approaches to enhance patient compliance and promote public health and safety. Persuasive approaches to patient coping skills, nutrition, and lifestyle changes.. 	<ul style="list-style-type: none"> Facilitates team work and interprofessional collaboration. Involves patients and their families in coordinated decisions. Manages time for lifelong learning, professional development, and family commitments.

Table 2. Rubric for the three roles of the physician and the three related elements of performance (Hojat, et al., 2013)