readers use the series, but results were not available prior to abstract submission. **Results:** Six Spot the Diagnosis! posts have been published, each of which begins with the selection of a piece of fine arts that showcases a potential medical diagnosis and a blog post outlining an interpretation of the work informed by observations, historical reports, and medical evidence. Each was published as a blog post on a Saturday and added to a page containing a list of all posts in the broader Arts PRN section on CanadiEM. All contained a single piece of art as the focus, 6 ± 2 (median $\pm$ IQR) questions, 638 ± 250 words, and 6 ± 3 references. The answers to questions are hidden under drop-down formatting to allow viewers to arrive at their own answers first. In the first 30 days of publication, each post in the series was viewed 1582 ± 401 times. **Conclusion:** The Spot the Diagnosis! series is an online educational resource published on CanadiEM.org that aims to improve learners medical knowledge and observational skills by featuring fine arts pieces with relevant question-and-answer style posts. This series fills the gap between art and medicine and has been well received by CanadiEM viewers. We look forward to analyzing responses in our survey to further understand how, why, and who uses this new and innovative resource.

Keywords: innovations in emergency medicine education, arts in medicine, observation skills

P168

Critical dynamics study of burnout in emergency department health professionals in New Brunswick: revisiting 6 years later

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Introduction: Emergency Department (ED) staff burnout correlates with psychological coping strategies used by Emergency department health professionals (EDHPs). Staff at two urban referral EDs in New Brunswick took part in a survey of burnout and coping strategies after one ED experienced an influx of new physicians and a newly renovated ED in 2011. Six years later, ED crowding and EDHP staffing problems became prevalent at both EDs. We compared levels of burnout at two urban referral EDs to determine if burnout and coping worsened over time. **Methods:** An anonymous survey of all EDHPs at 2 urban referral EDs was performed in 2011 and in 2017. A demographics questionnaire, the Maslach Burnout Inventory (MBI, measuring emotional exhaustion, depersonalization and personal accomplishment), and the Coping Inventory for Stressful Situations (CISS, measuring task-oriented, emotion-oriented, and avoidance-oriented coping styles) were collected. Descriptive statistics and linear regression models examined relationships over time and between the two hospitals. **Results:** Burnout scores were similar both at the two facilities and in 2011 (n = 153) and 2017 (n = 127). There were no differences between samples or EDs for important factors. Emotion-oriented coping was associated with higher levels of burnout, while task-oriented coping was inversely correlated with burnout. Experiencing professional stress was a significant predictor of emotional exhaustion, while those working longer years in their current department had higher emotional exhaustion and depersonalization. By 2017, both EDs had experienced significant nursing staff turnover (50%) compared to 2011. **Conclusion:** Burnout scores remained consistent after 6 years at these two urban referral EDs. Given the evidence that increased years of service is associated with increased burnout, high staff turnover rate at both EDs could explain how scores remained constant. Staff turnover may represent a way these ED systems cope in a challenging environment. In 2017, task-oriented copers continued to score lower while emotionally-oriented copers showed higher burnout risk, and experiencing professional stress remains a strong predictor of burnout.

Keywords: burnout, emergency medicine, administration