

**Discussion:** The framework and its implications for further research and development are presented at the conference. We will specifically focus on the question, “What is needed to move from a reactive to a more proactive stance in policy and practice?”

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### Tragedy Meets GME: The Impact of the October 1st Mass Casualty Incident on Academic Attending and Resident Physicians

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**Introduction:** On October 1, 2017, a gunman fired on a festival in Las Vegas, Nevada, killing 58 people and wounding over 500. Multiple casualties were received at two nearby hospitals that sponsor residency programs: Sunrise Hospital and Medical Center and University Medical Center.

**Aim:** To evaluate the impact of the most lethal mass-shooting event in US history on graduate medical education (GME) at the involved hospitals.

**Methods:** Anonymized surveys were sent to 210 physicians at SMC and 110 physicians at UMC. Surveys incorporated 4 validated instruments: The Post Traumatic Growth Inventory (PTGI), The Impact of Events Scale-Revised (IES-R), The Multidimensional Scale of Perceived Social Support (MSPSS), and The Team Cohesion Factor (TCF).

**Results:** Sixty-six physicians completed the surveys (38 attendings; 17 residents). 10% of physicians scored in the likely posttraumatic stress disorder (PTSD) range and 15% found themselves avoiding or struggling with managing similar patients, though overall survey response rate was low. The majority of physicians did not believe the event impacted their specific GME activities. No attending physician rated the event as negative in terms of global impact on GME, and 34% rated it as positive. However, 12 of 17 residents rated the event as a hurdle in its GME impact. A regression model predicting the IES-R score demonstrated a trend that those with higher pre-event stress and lower social support reported more adverse impact ( $p < 0.06$ ).

**Discussion:** We believe our study is the first to examine the impact of mass casualty traumatic events on graduate medical education. Attendings and residents differ in their global perception of the impact, with attendings viewing it as a positive event and residents as a challenge. Pre-event level of stress and perceived social support predicted the impact of the event and may partially explain these results if residents and attendings vary on these parameters.

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