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***Abstracts will be considered for both poster and platform presentations***

***Other***

**Background:** The concept of “burnout” has been operationally-defined as physical and emotional drain that begets a reduced ability, or inability, to perform work and care-giving tasks appropriately. Literature in this field reveals that the prevalence of burnout may peak during medical education, including medical school and further education (i.e., residency). The implications of burnout are far-reaching, including both an impact on professional care delivery and self-care. Professionals who provide health and human services stand out as a group at a particular risk for burnout. Research has previously indicated that lower rates of burnout are an indicator of wellness, but this has not been appropriately validated empirically. The importance of wellness, however, is so entrenched in the culture of clinical practice that medical education settings have introduced policies in recent years to promote well-being among learners. Longstanding theories of career development that extol the importance of strong self-concept and satisfaction as well as the simultaneous attention given to burnout and wellness in the literature suggest that their relationship is likely beyond contrived.

**Methods:** This project aims to take an initial, pilot approach to examining factors associated with burnout, satisfaction, and perceptions of wellness. Using a model previously employed with an international healthcare staff, residents in neurology, child neurology, and psychiatry will be administered the Maslach Burnout Inventory Human Services Survey for Medical Personnel (MBI-HSS (MP)), the Patient Health Nine-Item Questionnaire (PHQ-9), and the Accreditation Council for Graduate Medical Education (ACGME) Well-Being survey questions at three time point in the academic year. The anticipated N for the study is 51 residents. Additional analyses (e.g., t-test) can then be run to determine the strength of relationship between ACGME well-being questions and their goodness-of-fit to the concept of burnout.

**Conclusion:** The primary research hypothesis is that objective burnout scores will negatively correlate with well-being and PHQ-9 scores. This research will be a crucial first-step examination into the general well-being and job satisfaction of neurology and psychiatry residents. In turn, these results will guide further experimental intervention to bolster any deficits that may be identified. Further, with minimal adjustments, the project should be applicable to residency programs in other specialties.