

Coping with Patient Loss and Secondary Trauma, A Transition to Residency Pilot Session for Fourth-Year Medical Students

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Introduction: Preparedness and training for the loss of patients as well as the grief that comes along with this is a part of medical training that needs to be addressed. Having the ability to work through these experiences will create physicians who may be less likely to become burnt out.

Methods: We administered a general needs assessment with questions surrounding death of patients, grief, and secondary trauma to post-clinical year medical students. The information from this prompted the creation of a novel curriculum surrounding these topics in a transition to residency session for fourth-year, post-match medical students. Session topics included death of patients, grief, secondary trauma, debriefing competencies, and creating action plans.

Results: We found that every single student who completed this session (n=12) had experienced something traumatic during their medical training thus far. We also found that after this session nearly every student felt they improved their ability to cope with patient death and secondary trauma in medicine. However, every student also agreed that in addition to this session, this training and reflection should come earlier in medical school as well.

Discussion: This session offered students important skills needed to address traumatic patient experiences. Limitations included smaller group size, self-selection into the session, and the need for this curriculum to have a longitudinal component to better address needs of students.