BACKGROUND
• Burnout is a triad of high emotional exhaustion, low personal accomplishment, and high depersonalization.
• It is the result of chronic interpersonal & environmental stressors that lead to impaired professional development, indifference, and carelessness.
• Burnout is a pressing concern, as physicians have a higher suicide rate than the general public; 300 to 400 physicians commit suicide annually.
• The 2 leading causes of death among residents are neoplasm and suicide.
• The most successful interventions are those which are organization-directed (workload requirements, environmental stressors), however, physician- and trainee- targeted interventions led by colleagues do still produce significant effects in reducing burnout.

VISION FOR THE APP
• We set out to develop a novel smartphone app centered on cultivating point-of-care gratitude practice and community building.
• Easily accessible & applicable to all resident physicians: the night-shift resident on a break at 2AM, the early morning parent tending to children before the OR at 5AM, the weekend traveler on a flight out of town, and the day-shift resident on a lunch break.
• Concept first introduced to incoming CU medical students with hard-copy gratitude journals in 2019.

WHY GRATITUDE?
• In 2013, psychologists Robert Emmons and Robin Stern from the University of California-Davis published “Gratitude as a Psychotherapeutic Intervention,” stating that “gratitude has one of the strongest links to mental health and satisfaction with life of any personality trait—more so than even optimism, hope, or compassion.”
• Emmons and Stern reported that those who practice gratitude are more effective in coping with stress and demonstrate increased resilience in the face of trauma-induced stress.
  “persons who are randomly assigned to keep gratitude journals on a weekly basis exercise more regularly, report fewer physical symptoms, feel better about their lives as a whole, and are more optimistic about the upcoming week, compared to those who record hassles or neutral life events.”

NEXT STEPS
• Build out community message board space for specific departments.
• Establish a small group of users for initial testing and feedback of the app.
• Multi-institutional RCTs among varying resident cohorts and specialties, in addition to investigations of its efficacy for medical students, trainees, faculty, APPs, nursing team members, and others.

ACKNOWLEDGEMENTS: We thank the OSL for their support in providing hard-copy gratitude journals.

DISCLOSURES: The authors have no relevant disclosures.