**Association Between Surgical Resident Burnout and Career Decisions**

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**INTRODUCTION:** Burnout is prevalent among surgical residents. Its effect on career decisions is unclear. This study aimed to examine the association between burnout and career decisions.

**METHODS:** An annual voluntary confidential survey, administered with the 2017-2020 American Board of Surgery In-Training Examinations, assessed burnout (modified Abbreviated Maslach Burnout Inventory) and fellowship subspecialty intent. Fellowship intention was categorized by length of fellowship and published subspecialty attending burnout levels. We examined association between burnout and change in fellowship intention (between respondents’ first and last surveys) with multivariable logistic regression models, adjusting for resident and program characteristics. Interaction effects were examined by comparing differences in simple effects.

**RESULTS:** Of 3,036 residents surveyed at least twice, 1,712 initially switched to pursue 2+ year fellowships; 351 (20.5%) subsequently switched to 1-year fellowships. Residents with burnout at first assessment (49.9%) were significantly more likely to switch to shorter fellowships (odds ratio 1.57; 95% CI, 1.17 to 2.11; p = 0.02). Residents who developed burnout (13.5%) were even more likely to switch to shorter fellowships (+5.4%; p = 0.05). Those whose burnout resolved (19.7%) were less likely to switch to shorter fellowships (~10.2%; p = 0.01). There were 1,028 residents who initially intended to pursue high-burnout subspecialties; 214 (20.8%) switched to low-burnout subspecialties. Neither initial burnout nor burnout development was associated with switching to low-burnout subspecialties.

**CONCLUSION:** Resident burnout is associated with changing to shorter fellowships, but not low-burnout specialties. Burned out residents can make short-term decisions with long-term career implications that directly impact the future surgical workforce.

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**Comparison of Visual Abstract vs #BetterPoster Style for Surgery Research Presentations**

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**INTRODUCTION:** Biomedical poster presentations play a key role in disseminating research. However, no consensus exists about the optimal poster format to achieve this goal. Two formats, #BetterPoster and the Visual Abstract, were developed recently to improve the quality, appeal, and effectiveness of poster presentations. The aim of this study was to compare the efficiency and general appeal of 2 poster styles, Visual Abstract and #BetterPoster, for the dissemination of surgical research.

**METHODS:** A 7-question survey graded on a Likert scale from 1 to 5 was developed to evaluate both poster styles. The survey was distributed among a total of 24 surgical trainees and faculty attending the University of Minnesota Surgery Research Day. Survey responses for each style were compared using a paired t-test. For each of the 7 questions, only subjects who responded to both poster styles were included.

**RESULTS:** When comparing responses about the #BetterPoster Style and Visual Abstract Style, 3 of 7 questions were significantly different. All 3 questions favored #BetterPoster over Visual Abstract style, including: “general appeal” (p = 0.0006), “ease in which able to obtain main message from poster” (p = 0.014), and “flow of poster easy to gain information without talking to presenter” (p = 0.001). The remaining 4 questions did not reach a statistically significant difference between the 2 poster styles.

**CONCLUSION:** In this study, #BetterPoster was found to be superior to Visual Abstract style in areas of gaining attention from participants, ease of receiving the main message, and ability to obtain information without discussion with the presenter.

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**Defining and Validating Flourishing in Surgery: Differences by Race and Gender in a Multicenter Study**

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**INTRODUCTION:** The presence of physician well-being has profound personal, clinical, and economic impact. Flourishing has been suggested as a valid measure of global well-being in surgeons and we aimed to confirm this in a large national sample, exploring differences by gender and race.

**METHODS:** A questionnaire was administered to all General Surgery residents at 16 ACGME-accredited programs. The Mental Health Continuum was used to measure flourishing, an established metric of psychosocial thriving in nonphysicians. Correlation between flourishing and validated measures of resilience and risk were assessed. Differences by gender and race were explored.

**RESULTS:** Two hundred and sixty-seven residents (58% nonmale, 41% non-White) responded to the survey. Overall, flourishing was significantly positively correlated with all resilience factors and negatively correlated with all risk factors. Based on interaction analyses, there was no indication that the direction of associations within gender or race differed from those in the overall sample. Compared with male respondents, nonmale respondents had significantly lower mindfulness; significantly higher depressive symptoms, emotional exhaustion, stress, and anxiety; and a trend...