

2017 CREOG Exam Resident Survey

For the purpose of this survey, resident wellness is defined as an ongoing process involving self-awareness and healthy choices resulting in a successful and balanced lifestyle with your work/learning environment.

____ By checking this box I understand that the CREOG Survey is voluntary and anonymous; it is NOT linked to individual personal information, nor is it provided to individual program directors. The demographics and answer selections may be used by CREOG and/or other organizations for educational research or similar purposes, and may be distributed as scholarship on the topic.

1. What is your perception of the importance placed on resident wellness in relation to other required aspects of your residency program?
 - a. Not a priority (beyond the scope of a residency program)
 - b. Somewhat a priority (addressed when there is time)
 - c. A priority for the residency program (structured wellness activities)
 - d. I don't know

2. During your residency training, have you personally experienced any of the following issues? (select all that apply)
 - a. Prefer not to answer
 - b. Depression
 - c. Burnout
 - d. Suicide attempt
 - e. Drug uses
 - f. Binge drinking
 - g. Eating disorder
 - h. I don't know
 - i. Other: _____

3. Rate the effectiveness of the activities you currently have in your residency program? (select NA = not applicable if you do not have this in your program)

Activity	NA	Very Effective	Effective	Not Effective
Retreat				
Trained Counselor Sessions				
Resident Wellness Day				
Volunteer Activities				
Strategic Napping				
Fatigue Education				

Morgan HK, Winkel AF, Nguyen AT, Carson S, Ogburn T, Woodland MB. Obstetrics and gynecology residents' perspectives on wellness: findings from a national survey. *Obstet Gynecol* 2019; 133.

The authors provided this information as a supplement to their article.

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Faculty Mentoring				
Resident Mentoring (Big Sib)				
Structured Reflection				
Case Discussion Rounds (i.e. Balint, Schwartz or other multi-disciplinary)				
Organized extracurricular activities (sports cooking, dinners, etc)				
Other:				
Other:				
Other:				
Other:				

4. How often do you engage in activities that help maintain wellness in your life each week? (select NA = not applicable if you do not engage in this activity)

Activities	NA	Rare (0-1 times)	Sometimes (2-3 times)	Often (4+ times)
Exercise				
Napping				
Meditation				
Cooking				
Social activities with fellow residents				
Social activities with family members				
Social activities with other groups				
Talking to family				
Talking to friends				
Watching TV				
Drinking alcohol				
Hobbies				

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Reading for Fun				
Play an Instrument				
Attend a religious/spiritual Activity				
Tobacco				
Marijuana/Other substances				

5. Select one activity that you believe all Residency Programs should provide to promote wellness in residency training. (Drop Down Menu)
- a. Not important and should not mandate activity
 - b. Annual Resident retreat
 - c. Access to a wellness coach/counselor
 - d. Facilitate exercise – e.g. onsite gym, pay for gym membership
 - e. Dedicated time for wellness maintenance – e.g. wellness day several times per year for Drs. Appointments, take care of personal business (renew driver’s license)
 - f. Access to confidential behavioral health services
 - g. Regular team building activities
 - h. Sponsored social activities
 - i. Peer mentor/support groups
 - j. OTHER : _____
6. How do you feel wellness education in residency training should be promoted? (Please select one)
- a. Didactics
 - b. Podcasts
 - c. Online modules/videos
 - d. Off-site workshops
 - e. Team building exercises
 - f. Program Retreats
 - g. Other: _____