

and limitations for future use in assessing prehospital ambulance performance.

Methods: With support from the Ministry of Health, we sent teams of trained observers to 30 ambulance substations across Ukraine. Using data collection tools on mobile devices, these observers accompanied Advanced Life Support ambulances on urgent calls for periods of 72 hours. We evaluated this program for collecting patient encounter data against the investment of time, personnel, and financial resources.

Results: Over a two-month period, we directly observed 524 patient encounters by public ambulances responding to urgent calls at 30 ambulance substations across Ukraine. We employed 6 observers and 2 administrators over this time period. Collecting our observations required 2,160 person-hours at the ambulance substations. The total distance traveled to these sites was 11,375 kilometers. Project costs amounted to 37,000 USD, equating to 71 USD per observed patient encounter.

Discussion: Workplace-based assessments are a cost-effective strategy to collect data on the delivery of prehospital care in select populations. This data can be useful for identifying the current state of EMS care delivered and evaluating compliance with established treatment protocols. Successful implementation depends on effective planning and coordination with a commitment of time, personnel, and financial resources. Issues of patient privacy, legal permission, and observer training must be considered.

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Young Doctors' Emergency Medicine Rotation Qualifications and Relation with Self-Confidence

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Introduction: Medicine is one of the most important areas of higher education. It is important that undergraduate students are well educated and have theoretical knowledge, but also have good clinical skills after graduating from medical training.

Aim: To understand whether the training objectives of the emergency medical internship was completed or not and to find the relationship between young doctors' self-confidence and what they can do via using Rosenberg self-esteem scale (RSES). In addition, an objective was to consider which learning methods are more useful based on the feedback.

Methods: This survey study was performed in 2018 at Bülent Ecevit University, Faculty of Medicine, Zonguldak, Turkey with the students who completed an emergency department rotation in the 2017-2018 education term. The questionnaire was composed by the researchers. It consisted of three parts which were included demographic information and education methods in emergency medicine of internships, questions about knowledge goals and learning goals for basic medicine applications, and RSES to assess young doctors' self-confidence.

Results: 96 young doctors with the mean age of 25.22 ± 1.216 years (minimum 23 and maximum 30 years) were in the study. 3 (55.2%) of which were female. All young doctors were evaluated with RSES4. (4.2%) of which were low self-confidence and 32 (33.3%) of which were high self-confidence. The best useful learning methods were clinical application of interaction with patients (n=828. 5%) and invasive procedures performed on patients (n=727. 5%).

Discussion: The more you practice, the more you learn. Practice-based education is an important factor in a young doctor's life. Besides, the higher self-confidence you have, the more you can. Young doctors with high self-esteem see themselves as qualified to perform applications even in complicated situations. However, more studies are needed to find out whether they could really perform or not.

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