of all patients having surgery on the pediatric plastic surgery service during two separate 3-month blocks bridged by a transition period for intervention implementation. In the pre-intervention group, resident reporting of complications was consistent with current practices at our institution where the chief resident on service reports complications prior to bi-monthly M&M conferences. Division leadership, in conjunction with patient safety experts, then developed an online event reporting system (ERS) and implemented policy initiatives to facilitate resident utilization of ERS in all clinical settings. The post-intervention group included all residents on service utilizing the ERS for complication reporting at the time of the event and the ERS was synchronized to generate data for M&M conference. A trained surgical reviewer recorded all complications for patients throughout the six-month study period and this served as the reference standard. Fisher’s exact test was used for binary comparisons.

RESULTS: There were 32 complications detected in 219 patients from June-August, 2015 and 35 complications detected in 202 patients from October-December, 2015. Compared to this reference standard, the proportion of complications reported by residents for M&M conference in the pre-intervention group was 28.1% (9/32 events reported). After the intervention, the proportion of complications reported by residents increased to 91.4% (32/35 events reported) (P < 0.05).

CONCLUSIONS: An intervention utilizing an online event reporting system led to significant improvements in complication reporting by plastic surgery residents in an academic teaching hospital. Implementation of an event reporting system can enhance practice-based learning and quality improvement, addressing an ACGME core competency.

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The Evolution of Racial and Ethnic Diversity in Plastic Surgery Residency Programs

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BACKGROUND: Increasing the diversity of U.S. physicians may help improve patient communication and mitigate healthcare disparities. However, plastic surgeons remain predominantly Caucasian while the U.S. population increases in diversity. This study analyzes temporal racial trends in plastic surgery residency relative to other surgical specialties.

METHODS: Graduate Medical Education reports published by the Journal of the American Medical Association