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models, and case-based discussions.

Effectiveness: 30 residents from two EM programs participated in the curriculum. Analysis of matched pre- and post-test scores revealed a significant increase in medical knowledge, with scores rising from an average of 53% to 78% ($p<0.001$). Participants reported increased motivation and engagement, and 100% of respondents "agreed" or "strongly agreed" that the event was effective in improving their ability to manage patients in austere environments. These results support the value of incorporating gamification and hands-on skills training into wilderness and environmental medicine education.



16 Community and Connection in EM: An Arts- And Humanities-Based Curriculum to Address Loneliness in Residency

Kamna Balhara, Christina Seto, Nathan Irvin

Background: Loneliness is a public health crisis affecting patient outcomes and clinician well-being. EM residents are especially vulnerable, given shift work in high-stakes settings. However, little is known about how EM curricula can mitigate loneliness. Arts and humanities (A&H) pedagogies supporting connection, resilience, and reflection may represent effective tools. We created a year-long A&H-based curriculum framing loneliness as a determinant of patient health and clinician well-being.

Educational Objectives: Recognize loneliness as a public health crisis for ED patients Describe best practices and resources to address patient loneliness Explore personal experiences with loneliness in EM training Practice reflection and community building as tools to mitigate loneliness

Curricular Design: Our multimodal curriculum includes five one-hour sessions integrated into residency didactics and three elective sessions. (Table 1) Evidence-based A&H pedagogies were used to foster group dialogue in safe learning spaces and enable reflective practice. Each didactics session uses A&H techniques to encourage reflection on specific themes supplemented by relevant evidence and literature, and ends with journaling prompts to encourage strategies for addressing loneliness. Elective sessions in arts-focused community spaces foster broader connections between residents, faculty, and loved ones.

Impact: Impact will be assessed via pre-, mid-, and post-surveys using the UCLA Loneliness Scale. Baseline data show that all respondents experienced loneliness in residency; all recognized it as a health determinant, but none consistently included social connection resources in care plans. 97% of respondents evaluated sessions to date as "excellent" or "good"; positive attributes noted in free-text responses include the communal nature of activities and facilitation of meaningful discussion and diverse viewpoints. This innovative approach may be relevant to EM educators across varied settings.

Table 1. Overview of curriculum sessions (*Sessions marked with an asterisk have already occured at time of abstract submission.

Session Date	Session Topic	Arts and humanities-based pedagogies	Facilitators or instructors	Other participants (in addition to residents)
September 2024, residency conference	Introduction to loneliness as a social determinant of health and as an aspect of medical training*	Museum-based education (Personal Responses Tour); reflective writing	Faculty	n/a
October 2024, Local art museum	*Community building in the community - elective activity #1, focused on opportunities for individual reflection, sharing, and group cohesion**	*Museum-based education*	*Faculty,*	*Resident and faculty family or loved ones*
November 2024, residency conference	Trauma, shame, and imposter syndrome as contributors to loneliness in residency training	Museum-based education (Visual Thinking Strategies); reflective writing	Faculty panel	n/a
December 2024, Local art museum	*Community building in the community - elective activity #2, focused on opportunities for individual reflection, sharing, and group cohesion*	*Museum-based education*	*Faculty*	*Resident and faculty family or loved ones*
January 2025, residency conference	Interprofessional practice as an antidote to loneliness	Medical improv; reflective writing	Faculty	ED nursing colleagues
February 2025, residency conference	Community solutions and clinical resources for connectedness for vulnerable ED populations	Museum-based education; reflective writing	Faculty, community partners	n/a
April 2025, Local art museum	*Community building in the community - elective activity #3, focused on opportunities for individual reflection, sharing, and group cohesion*	*Museum-based education*	*Faculty,*	*Resident and faculty family or loved ones*
May 2025, residency conference	Building community within our program: personalized and communal solutions	Graphic medicine; music; reflective writing	Faculty, artists	n/a

17 Pilot Program on Feasibility of Health Care Proxy Form Completion in the Emergency Department

Harsh Panchal, Dahlia Luongo, Cassidy Dahn

Background: Health care proxy (HCP) forms, a critical component of advance care planning (ACP), allow patients to appoint an agent to make medical care decisions aligned with their values and priorities in the event that they are unable to communicate themselves. National rates of HCP completion are notably low.

Objectives: Our aim was to promote patient education and completion of HCP forms in the Emergency Department (ED) of NYU Langone Health Tisch Hospital, where only about 1/3 of patients admitted inpatient are discharged with