

Emotions experienced by residents

see also [Neurosurgical resident emotions](#)

Medical [residency](#) can be a challenging and [emotionally](#) demanding [experience](#), and [residents](#) may experience a wide range of emotions as they navigate their [training](#) and clinical responsibilities. Some common emotions experienced by residents may include:

[Stress](#) and [anxiety](#): The demanding [workload](#) and high stakes of medical [training](#) can lead to high levels of stress and anxiety.

[Frustration](#) and [disappointment](#): Residents may feel frustrated or disappointed when [patient outcomes](#) do not meet their [expectations](#), or when they are not able to provide the level of care they would like due to time constraints or other limitations.

[Insecurity](#) and [self-doubt](#): The steep [learning curve](#) and constant [evaluation](#) can lead to feelings of insecurity and self-doubt among residents.

[Empathy](#) and [compassion](#): Residents may also experience strong feelings of empathy and compassion for their patients, as they witness their struggles and work to alleviate their suffering.

[Satisfaction](#) and [fulfillment](#): Despite the challenges, residents may also experience a sense of satisfaction and fulfillment from their work, particularly when they are able to make a positive impact on the lives of their patients.

It is important for residents to be aware of these [emotions](#) and to develop strategies for coping with the stresses and challenges of medical training. This may include seeking support from [colleagues](#) and [mentors](#), engaging in self-care practices such as [exercise](#) and [meditation](#), and cultivating a sense of perspective and purpose in their work.

The aim of a study was to explore family medicine [residents'](#) and final-year medical students' [emotions](#) during their [clinical training](#).

This [qualitative study](#) was performed with 15 family medicine [residents](#) and 24 final-year medical students using a convenience sample from two medical faculties to explore and analyze their [emotions](#). Data were gathered by means of focus group [interviews](#), including six interviews conducted and recorded through [online meetings](#). Data were analyzed for themes using a thematic analysis approach. Since the interviews reached saturation in terms of content, the interviews were terminated at the end of the sixth focus group meeting. Each interview took an average of 45-60 min.

Three main themes emerged from the data regarding residents' and interns' emotions. These were the "[clinical climate's](#) role", "[emotions during patient encounters](#)" and "[coping strategies](#) with [negative emotions](#)". The most commonly encountered emotions were [tension](#) and [anxiety](#) followed by [frustration](#) and [uncertainty](#).

Family medicine [residents](#) and final-year medical students are challenged with emotions during their [clinical training](#). Therefore, medical [educators](#) have to be aware of the need to support them in

reflecting on their emotions by prioritizing residents' and interns' well-being ¹⁾.

¹⁾

Tanrioer O, Peker S, Hidiroglu S, Kitapcioglu D, Inanici SY, Karamustafalioglu N, Gulpinar MA. The emotions experienced by family medicine residents and interns during their clinical trainings: a qualitative study. Prim Health Care Res Dev. 2023 Apr 5;24:e25. doi: 10.1017/S1463423623000051. PMID: 37016917.

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