

Assessing Gender Bias in Paramedic-Provider Patient Handoffs

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Background/Objective: Gender bias is prevalent in the medical workplace and can lead to burnout. Female providers report higher rates of microaggressions, but studies do not describe direct observation of bias in the workplace. Research shows gender bias in physician evaluations but has not evaluated how gender bias affects communication during patient care. This investigation addresses both limitations by observing whether gender bias impacts paramedic-provider communication. We hypothesize that EMS personnel will preferentially communicate with male Emergency Medicine providers during patient hand-off reports.

Methods: In this study, a blinded observer collected data in real-time while watching interactions between EMS personnel and Emergency Department providers. The observer recorded whether the attending or resident physician received the initial attention and the majority attention of the paramedic and whether the paramedic asked if either the attending or resident physician had questions. Additional questions on the survey regarding EMS communication were documented to keep the observer blinded to the nature of the study. Chi-square analysis was used to determine association between each of four outcomes and provider gender based on four attending-resident groupings (female-female, female-male, male-female, male-male).

Results: Preliminary results of this study show that paramedics preferentially give their first attention and majority of their attention to residents over attendings, regardless of gender. Generally, paramedics did not ask if either attendings or residents had questions. There were no statistically significant differences in likelihood of any of the outcomes based on gender pairings.

Conclusion: Our data do not support the hypothesis that EMS personnel will preferentially communicate with male Emergency Medicine providers during patient hand-offs.

Clinical Impact and Implications: Though gender bias did not affect patient care communication in this study, healthcare workers should be made aware of this potential and educated on how it might appear. Further research should include analyzing gender bias in patient care communication within other medical specialties.