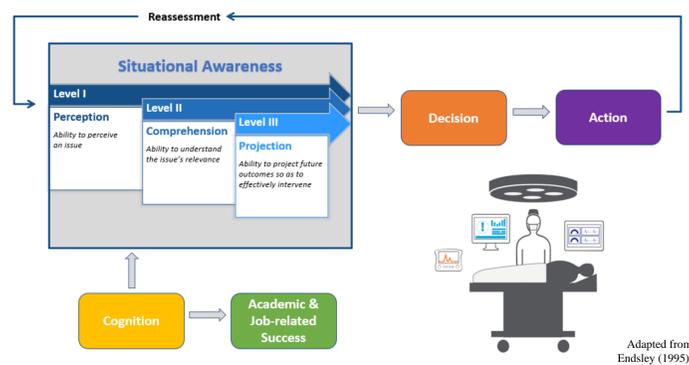


## INTRODUCTION

- CRNAs must be prepared to manage the complexity of anesthetic practice where crisis can rapidly lead to catastrophe.
- Key to effective care is situational awareness (SA), without which, medical error may arise with costly consequences.
- In academia predicting potential students' abilities to develop SA is a challenge confounded by limited evidence-based admission criteria and a need to graduate efficient clinicians.

## LITERATURE REVIEW

- SA is defined as one's ability to perceive an issue, understand its significance, and project future events so as to aptly intervene.
- A recent review of critical incident errors revealed anesthesia provider SA loss to account for 81.5% of errors. Higher levels of SA result in optimized outcomes and reduced human error.
- Personal attributes may be predictive of one's SA. It has been shown that as cognitive level increases, so too does level of SA.
- In student nurse anesthetists (SRNAs), among variables of memory, automaticity and cognition, only cognition was able to demonstrate a significant correlation with SA ( $p < .05$ ).
- Other studies have demonstrated cognition's predictive implications for academic and job-related success.
- No studies have demonstrated cognitive testing utility in the SRNA admission process to predict SA and academic success.



## RESEARCH DESIGN

### Part I:

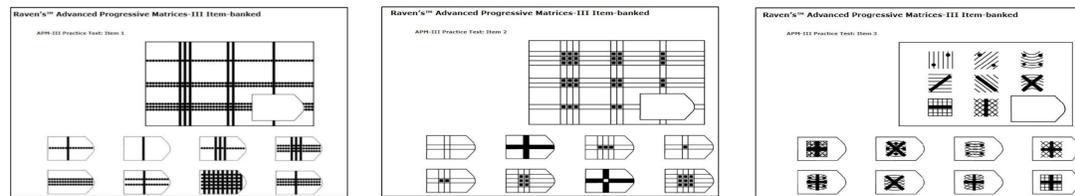
- IRB-approved retrospective, quantitative, correlational design examining the relationship between cognitive and admission status and their associations with traditional admission indices (GPA, ICU experience, CCRN score, interview score).

### Part II:

- Qualitative study of admission committee perceptions post-admission decision to assess the value they ascribe to SA, cognitive scores, and cognitive testing in the admission process.

## METHODOLOGY

- After interviews, 37 candidates voluntarily completed the computerized, item-banked Raven's Advanced Progressive Matrices (APM-III) to assess cognition (examples below).
- Participation and scoring had no impact on admission decision as the admission committee was blinded to both. All results were strictly deidentified.
- Post-admission, the committee reviewed APM-III score reports and ranked projected performance. Data was compared with actual interview scores and admission outcomes.



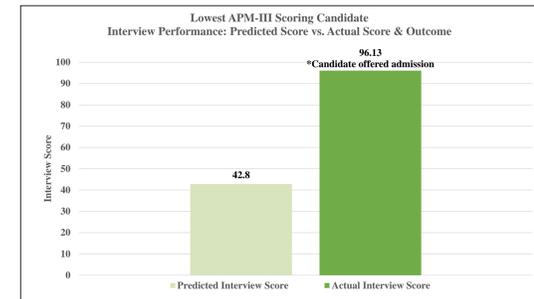
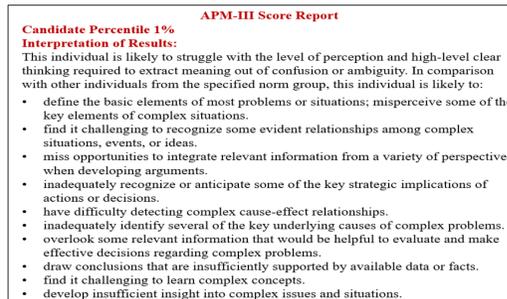
## RESULTS

### Part I:

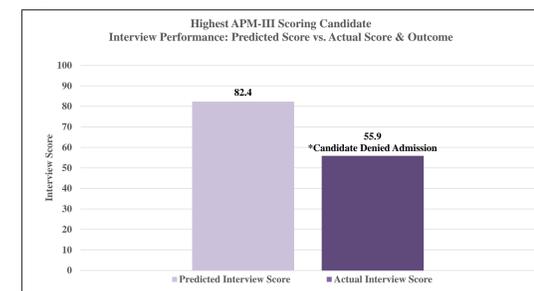
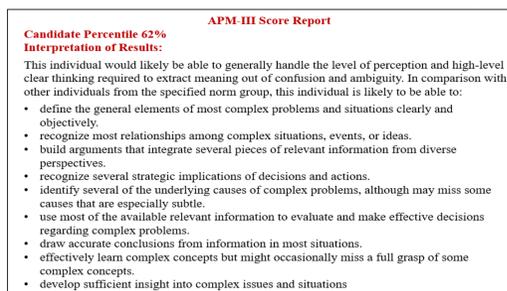
- No significant difference seen between APM-III scores of those admitted vs. not admitted.
- Admitted students had significantly higher interview scores ( $p < .05$ ).
- No significant association seen among APM-III scores and traditional indices.
- Insignificant, negative associations among admission vs. CCRN, GPA and ICU years.
- APM-III scores and interview scores were positively correlated, though insignificant.

### Part II:

- 88% believed SA to be "extremely important", while 53% felt current criteria predicts SA development "moderately well".
- 87% responded that level of cognition was "extremely important", and the majority felt an objective cognitive report would enrich overall evaluation.
- 83% rated the candidate with the lowest APM-III score as "below average". This candidate was offered admission (see below).



- 88% rated the candidate with the highest APM-III score as "above average". This candidate was not offered admission (see below).



## CONCLUSIONS

- Insignificant results & lack of correlations suggest that cognition is not a formally measured admission metric.
- While traditional measures are used to predict success, as CCRN scores, GPA, and ICU years increase, admission chances decline.
- The only criterion with a significant impact on admission was interview score, a subjective measure.
- Results demonstrate a lack in current admission criteria guidance, while raising the question of whether candidates with the greatest cognitive potential are being admitted.
- Lack of associations are underscored by the distribution of scores and candidate admission status. Notably, the candidate with the highest score was denied admission, whereas that with the lowest score was offered admission.

## PRACTICE IMPLICATIONS

- Measuring cognition in the interview process may provide an objective metric that captures applicants with superior potential to develop SA and succeed academically amidst current admission criteria lacking in evidence.
- The committee found potential in the utility of cognitive testing such that future use of APM-III cognitive reports would influence their overall appraisal of candidates.
- Use of this tool may also yield positive financial impact as the admission of more qualified candidates may reduce costs associated with both attrition and future clinical errors.
- Further investigation of personality testing traits that may affect interview performance & SRNA tenure is warranted.



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