**Results:** Thirty-eight members from the five health care professions participated in the simulation day in July 2017. In the self-assessment, significant improvements in communication about patient care, patient safety, and confidence as a member of the health care team were found post-simulation (p < 0.0001 for all three areas). Participants felt significantly more comfortable approaching all of the other health care disciplines about error (p < 0.05). There was also an increase in overall trust and respect among the providers (p < 0.05). However, there was no significant improvement in approaching nursing, pharmacists, RTs, or medics with questions.

**Conclusions:** This IPE simulation improved personal confidence in communication and identity as a member of a healthcare team. Learners perceived an increase in trust and respect among the various health care professions represented in this study, especially in regards to error reporting.

**Is the Number of Intubations Correlated with Proficiency in Milestone PC10: Airway Management?**

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**Background:** It is a well-established tenet of medicine that more frequent performance of a procedure leads to increased competency. It is unclear, however, whether more frequent performance of a procedure correlates with improved self-assessment and core faculty assessment of the corresponding Emergency Medicine milestone.

**Objectives:** We sought to determine if the number of intubations a resident has performed correlates with his self-assessment and with the core faculty’s assessment of Milestone PC10: Airway Management.

**Methods:** Using the scoring system established by the American Board of Emergency Medicine, all residents (n=25) in a three-year residency completed self-assessments of the 23 milestones, including PC10: Airway Management. Core faculty also assessed all residents on the 23 milestones. The number of intubations performed by each resident was then recorded using their procedure logs. A Pearson correlation coefficient and significance level was calculated between self-assessment on PC10 and number of intubations, and also between core faculty assessment on PC10 and the number of intubations.

**Results:** All of 25 residents completed self-assessments and were evaluated by the core faculty. The correlation between self-assessment on PC10 and the number of intubations was R=0.57, (p<0.05). See Figure 1. The correlation between core faculty assessment on PC10 and the number of intubations was R=0.59 (p<0.05). See Figure 2.

**Conclusions:** Self-assessment and core faculty assessment of the Milestone PC10: Airway Management are well-correlated with the number of intubations a resident has performed. This suggests that the milestone is a reliable indicator of proficiency.

**Learning Moment: Features of Online Asynchronous Learning Tools That Maximize Acceptance and Adoption by Medical Students**

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**Background:** Recently introduced in the literature, Learning Moment (LM) is a novel, unique, web-based asynchronous educational tool designed to optimize experiential learning. Medical students log concise clinical pearls for reflection and review in the form of “learning moments”, which are shared with peers among an entire community. Little is known about what features such educational tools like LM should have to maximize learner engagement.