

**Appendix to:** Hsiang E, Driver L, Blum EH, et al. LGBTQIA+ Health in Emergency Medicine Residency Curricula: A Pilot Needs Assessment. PRiMER. 2025;9:55.  
<https://doi.org/10.22454/PRiMER.2025.267110>

## METHODS – ADDITIONAL INFORMATION

Given the lack of validated survey instruments to assess LGBTQIA+ health education, our survey instrument was developed by the authors, which include LGBTQIA+ health researchers and education experts. We modeled the survey after previous surveys of education practices across EM residencies and attitudes, behaviors, and comfort among EM residents, as well as a recent needs assessment among internal medicine residents.<sup>11,13,15,16</sup>

Of the five institutions surveyed, three institutions are three-year residency programs, and two institutions are four-year programs. Faculty and/or program directors reported that LGBTQIA+ health education is primarily delivered through conference lectures on inclusive language and health disparities, typically ranging from a single lecture to a few lectures as part of a diversity, equity, and inclusion series across the academic year. A few programs occasionally conduct health equity journal clubs that address LGBTQIA+ topics. These didactics occur primarily when interested residents or faculty sign up to deliver them. To capture additional perspectives, residents were surveyed about their experiences with LGBTQIA+ health content, including other didactics not reported by program faculty.

Residents were recruited via email by individuals of the study team who served as site representatives at their respective institutions. Participant recruitment occurred from April to June 2024 with an initial email solicitation for participation followed by three email reminders at one- to two-week intervals.

To minimize response bias, individual identifying information was not collected. Survey questions beyond program and year in training did not have mandated responses. Participants were eligible to enter a raffle for a \$50 gift card upon completion of the survey unless prohibited by their institution or state law.

## **SURVEY INSTRUMENT**

### **Section 1: Demographics and comfort level with LGBTQIA+ patients**

\* = required

\*Please select your residency program:

- [Program A]
- [Program B]
- [Program C]
- [Program D]
- [Program E]

\*What is your PGY year?

- 1
- 2
- 3
- 4

What best describes your gender identity?

- Cisgender woman
- Cisgender man
- Transgender woman/transfeminine
- Transgender man/transmasculine
- Genderqueer or nonbinary
- Other (write in)
- Prefer not to answer

What best describes your sexual orientation? Check all that apply.

- Heterosexual
- Lesbian
- Gay
- Bisexual
- Queer
- Other (write in)
- Prefer not to answer

Overall, how comfortable are you addressing the needs of LGBTQIA+ patients?

- Very uncomfortable
- Uncomfortable
- Neutral
- Comfortable
- Very comfortable

*The following responses are on a scale of 1 (much more uncomfortable), 2 (more uncomfortable), 3 (neither more uncomfortable nor more comfortable), 4 (more comfortable), 5 (much more comfortable)*

Compared to treating heterosexual patients, how comfortable are you when applying the following skills when treating lesbian, gay, bisexual, or other sexual minority patients?

- Discussing gender identity
- Discussing sexual orientation
- Gathering sexual histories
- Performing general physical exams
- Performing sensitive exams (e.g. breast/chest, genitourinary exams)
- Screening for and treating STIs, including HIV
- Running a code or resuscitation
- Providing social/health-related resources or placing appropriate ED referrals

Compared to treating cisgender patients, how comfortable are you when applying the following skills when treating transgender, non-binary, or other gender minority patients?

- Discussing gender identity
- Discussing sexual orientation
- Gathering sexual histories
- Performing general physical exams
- Performing sensitive exams (e.g. breast/chest, genitourinary exams)
- Screening for and treating STIs, including HIV
- Running a code or resuscitation
- Providing social/health-related resources or placing appropriate ED referrals

## **Section 2: Experiences with LGBTQIA+ health content in medical school and residency**

How many hours of teaching did you receive on LGBTQIA+ health during medical school?

- None
- <1 hour
- 1-2 hours
- 2-5 hours
- >5 hours

How many hours of teaching have you received so far on LGBTQIA+ health during residency?

- None
- <1 hour
- 1-2 hours
- 2-5 hours
- >5 hours

How satisfied are you with the QUALITY of training you have received on LGBTQIA+ health during residency?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

How satisfied are you with the QUANTITY of training you have received on LGBTQIA+ health during residency?

- Very satisfied
- Satisfied
- Neither satisfied nor dissatisfied
- Dissatisfied
- Very dissatisfied

LGBTQIA+ health content that you received during residency was delivered via which of the following? Check all that apply.

- Large group lectures (by residents/faculty)
- Large group lectures (by community members or outside experts)
- Small group case-based learning
- Journal club
- Community panel
- Simulation
- Online modules
- Other (write in)

Select the topics related to LGBTQIA+ health that you have received teaching on in residency:

- Soliciting pronouns and names
- Gathering a sexual history
- Taking an organ inventory
- Providing gender affirming care
- Special considerations for STI screening
- Special considerations for pediatric patients
- LGBTQIA+ specific health concerns
- LGBTQIA+ health disparities
- Legal and health system considerations
- Allyship or safe space training
- Other (write in)

### **Section 3: Learning preferences and suggestions**

With regards to LGBTQIA+ health, which learning modalities would you prefer? Check all that apply.

- Large group lectures (by residents/faculty)
- Large group lectures (by community members or outside experts)
- Small group case-based learning
- Journal club
- Community panel
- Simulation
- Online modules
- Other (write in)

With regards to LGBTQIA+ health, which topics would be most beneficial for you to learn about during residency? Check all that apply.

- Soliciting pronouns and names
- Gathering a sexual history
- Taking an organ inventory
- Providing gender affirming care
- Special considerations for STI screening
- Special considerations for pediatric patients
- LGBTQIA+ specific health concerns
- LGBTQIA+ health disparities
- Legal and health system considerations
- Allyship or safe space training
- Other (write in)

How relevant do you feel LGBTQIA+ health is to emergency medicine?

- Very relevant
- Relevant
- Slightly relevant
- Not relevant
- Only relevant to those who specialize in the care of this population

Lastly, please share 1-2 ideas or suggestions for improving LGBTQIA+ health teaching for EM residents: [write in]