

## Transition to Residency Risk Index (TRRI)

Jon Courand, MD – Adriana Dyurich, PhD  
University of Texas Health – San Antonio

Welcome to Residency Training, we hope that your training ahead will be exciting, challenging and ultimately rewarding. To ease your transition to the training program, please review the following checklist **confidentially**, noting those specific characteristics that might apply to your current situation. The individual characteristics listed have often been associated with a difficult transition to residency, feelings of isolation or loneliness, anxiety, depression or thoughts of suicide. *Your participation is voluntary.*

### Category A. These items might negatively impact your psychological wellness.

Circle all that apply

Did you match into a program that was lower on your rank list?	+1
Did you match into an unfamiliar city?	+1
Did you match into a secondary or “fall back” specialty?	+1
Did you have to SOAP into your current program or transitional year?	+1
Are you traveling to a program without an established support network? May include: family, friends, spouse, or significant other. Being an International Medical Graduate may apply here.	+1
Do you identify as a member of an at-risk, historically underrepresented, or otherwise disadvantaged group in this program?	+1
<b>Add circled points for TOTAL CATEGORY A</b>	

### Category B. These selections are weighted higher as known contributors to anxiety, depression, adjustment disorders and other psychological issues.

Circle all that apply

Are you experiencing a current significant life stressor outside of the program? Examples include: recent illness or death of a loved one, financial difficulties, divorce or separation	+3
Do you have an underlying chronic medical condition or disability? Example: sleep disorder, low auditory acuity?	+3
Have you experienced past symptoms of depression, anxiety or other mental health condition, regardless of whether there has been prior mental health counseling or psychiatric care?	+3
<b>Add circled points for TOTAL CATEGORY B</b>	

**TOTAL CATEGORIES A + B:** \_\_\_\_\_

**Scoring your form**

	<b>Category A</b>	<b>Category B</b>
<b>Level 1.</b>	Low risk to difficult transition	0-2 Points
<b>Level 2.</b>	Moderate risk to difficult transition	3-5 Points
<b>Level 3.</b>	High risk to difficult transition	6+

**Please complete the form below, cut out and fold it in half and hand it to the Program Director or Program Coordinator during a session break.**

-----  
**Result Slip:** Turn in **ONLY** this portion

Please, mark your answer and return to Program Director or Program Coordinator

Your Name:

\_\_\_\_\_

Level 1

\_\_\_\_\_

Level 2

\_\_\_\_\_

Level 3

\_\_\_\_\_

No reply

\_\_\_\_\_

## Information for Program Directors (Not provided to the Resident)

Residents/Fellows will may select one of the Levels or “opt out” with No Reply.

The literature <sup>(1,2)</sup> has shown those residents at risk for a difficult transition to residency training or isolation are at increased risk for depression, anxiety, suicidal ideation or completed suicide, especially in the first 3 months of training. Possible approaches to each box selected include:

Level 1: This resident is likely to be a low risk. Recommend routine monitoring.

Level 2: This is likely a resident with a moderate risk for a difficult transition. Ensure a monthly or twice monthly “check in” by PD, PC or Chief Resident over the next 3 months. Consider assigning a Peer Mentor to this resident.

Level 3: This is likely a resident with moderately high or high risk for a difficult transition or isolation. Ensure a twice monthly “check in” by PD, PC or Chief Resident x 3 months minimum, assign a Peer Mentor and consider scheduling a monthly meeting with Faculty Advisor x 4 months minimum.

No Reply or Form not returned– Routine monitoring

**Note – If a large percentage of your total incoming residents score themselves at a level 2 or 3 ( $\geq 30\%$ ), consider a program wide Peer Mentoring Program or organize Intern gatherings or team-building events early in the Internship year.**

1. Yaghmour, Nicholas A. MPP; Brigham, Timothy P. M.Div., PhD; Richter, Thomas MA; Miller, Rebecca S. MS; Philibert, Ingrid PhD, MBA; Baldwin, DeWitt C. Jr MD; Nasca, Thomas J. MD Causes of Death of Residents in ACGME-Accredited Programs 2000 Through 2014: Implications for the Learning Environment Academic Medicine July 2017, Volume 92 Issue 7 p 976-983.

2. Sen, S, Guille D et al. A prospective cohort study investigating factors associated with depression during medical internship. Arch Gen Psychiatry 2010, 67 (6), 557-565.