



**Assessment of Burnout among Nurses  
in Emergency Departments**

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### Abstract

Burnout is a worrying issue that has become more prevalent among nurses due to the stressful nature of their careers. It is a problem that affects employees in general, but nurses are particularly vulnerable to experiencing burnout. The study attempts to elucidate the potential influence of nurses' burnout on infection control procedures in the emergency department and a substantial correlation between exhaustion and diminished compliance with infection control measures. The research Commences on September 20th, 2023, and concludes on April 28th, 2024. This study utilizes a descriptive research design. The sampling method employed in this study was purposive sampling, which involved selecting 120 nurses employed in Emergence Unite, three governmental teaching hospitals located in Bagdad province, Iraq. The data analysis was conducted using Statistical Package for Social Science (SPSS version 26.0), which revealed that the burnout levels of the study sample were at a moderate level, with 64.2% experiencing burnout. Findings: The study reached the following conclusions: The degree of burnout experienced by nurses in emergency units was moderate. There was no statistically significant difference between sex, experience years, and burnout—however, there was a substantial difference between burnout and age and qualification.

**Keywords:** nurses, burnout, emergency department.

المخلص...

يعد الإرهاق مشكلة مثيرة للقلق والتي أصبحت أكثر انتشارًا بين الممرضات بسبب الطبيعة المجهدة لحياتهم المهنية. إنها مشكلة تؤثر على الموظفين بشكل عام، لكن

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الممرضات معرضات بشكل خاص للإرهاق. تحاول الدراسة توضيح التأثير المحتمل لإرهاق الممرضات على إجراءات مكافحة العدوى في قسم الطوارئ والارتباط الكبير بين الإرهاق وانخفاض الامتثال لتدابير مكافحة العدوى. يبدأ البحث في ٢٠ سبتمبر ٢٠٢٣، وينتهي في ٢٨ أبريل ٢٠٢٤. تستخدم هذه الدراسة تصميم البحث الوصفي. كانت طريقة أخذ العينات المستخدمة في هذه الدراسة هي أخذ العينات الهادفة، والتي تضمنت اختيار ١٢٠ ممرضًا يعملون في Emergence Unite، وهي ثلاث مستشفيات تعليمية حكومية تقع في محافظة بغداد، العراق. تم إجراء تحليل البيانات باستخدام الحزمة الإحصائية للعلوم الاجتماعية (SPSS الإصدار ٢٦,٠)، والتي كشفت أن مستويات الاحتراق النفسي لعينة الدراسة كانت في مستوى متوسط، حيث يعاني ٦٤,٢٪ من الاحتراق النفسي. النتائج: توصلت الدراسة إلى النتائج التالية: إن درجة الاحتراق النفسي التي يعاني منها الممرضون في وحدات الطوارئ كانت متوسطة. لا توجد فروق ذات دلالة إحصائية بين الجنس، وسنوات الخبرة، والاحتراق النفسي؛ ومع ذلك، كان هناك فرق كبير بين الإرهاق والعمر والمؤهلات.

### Dimension of burnout:

The dimension of burnout consists of three distinct signs: depersonalization, weariness, and diminished personal achievement. Exhaustion occurs as a result of mental exertion. Depersonalization refers to a negative or disconnected response towards patients or patient caregivers. The term "reduced personal achievement" refers to the experience of being unable to interact effectively with clients. (31)

**1. Exhaustion** refers to extreme fatigue resulting from expending excessive time and effort on a task or objective perceived as unproductive. This can manifest as a feeling of weariness, particularly emotional exhaustion, caused by the ongoing care of a patient with minimal chances of recovery. As a result, the individual may experience a lack of energy and motivation, ultimately leading to their decision to leave their job. (32)

**2. Depersonalization** refers to a distant or indifferent attitude towards work. Depersonalization manifests as cynical,

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pessimistic, and harsh attitudes or as engaging with coworkers or clients in an impersonal manner. Depersonalization can be observed as making inappropriate statements towards coworkers, attributing blame to patients for their medical condition, or the inability to show empathy or sadness when a patient passes away. Individuals in the professional setting may experience a decline in their motivation and desire to take a break from their work responsibilities. Indifferent and callous treatment of clients is increasingly prevalent. Consumers are often perceived as objects rather than individuals with needs and emotions. (33)

- 3. Decreased personal performance** refers to the tendency to evaluate one's work adversely and feel inadequate in one's ability to accomplish tasks, leading to widespread poor self-esteem. (34)

### Introduction

Healthcare personnel, particularly nurses, are responsible for upholding infection control procedures to protect patients and healthcare staff in the fast-paced and high-stress setting of the emergency department. Nevertheless, a worrisome problem is the growing occurrence of nurses' burnout and its possible influence on infection control measures in the ED. Nurses who experience burnout, defined by emotional weariness, depersonalization, and diminished personal achievement, may face significant challenges in carrying out their responsibilities, such as adhering to infection control policies. (1)

The notion of burnout originated in 1974 when Freudenberg characterized it as "feelings of failure and weariness or compression resulting from excessive demands on energy, personal resources, or the worker's spiritual strength." (2)

Burnout is a condition characterized by emotional, bodily, and mental fatigue resulting from an overwhelming and persistent amount of stress. It manifests when one experiences a sense of being inundated, emotionally depleted, and incapable of fulfilling incessant obligations. Your interest and motivation in your first assumed position diminish as stress persists. (3)

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The World Health Organization (WHO) has officially recognized burnout as a significant global health issue by classifying it as an "occupational phenomenon" in the 11th revision of the International Classification of Disease (ICD-11). (4)

Burnout can arise due to the existence of job demands such as excessive workload, extended working hours, imbalance in nurse-patient ratio, conflicts in roles, lack of fairness, disagreements in values, and insufficient job resources like inadequate social support from colleagues or management, lack of feedback, and limited involvement in decision-making. (5)

Burnout continues to be a significant issue in occupational health, presenting a worldwide threat to human well-being. Nursing is a demanding occupation that involves addressing the human dimensions of health and disease, which can ultimately result in job discontent and burnout. The job requires physical exertion because of its involvement with human health and functioning and mental exertion, which can result in mental fatigue when repeatedly exposed to unpleasant events and situations. Mental fatigue is one of the defining factors of burnout. (6)

Healthcare personnel, particularly emergency department specialists, experience persistent exposure to elevated stress levels due to the demanding nature of their work and many stress-inducing factors. The user's text is. (7) (8)

These challenging occupations often result in heightened discontentment with one's career. (9)

adverse health consequences exhaustion(10) Experiencing weariness can lead to severe health repercussions, such as a decline in overall well-being and a decrease in sleep quality. (11) Stress, in turn, triggers anxiety, which is characterized by feelings of nervousness, restlessness, misery, and occasionally a lack of control. These symptoms can result in physical and psychological illnesses frequently observed in this particular line of work. (12) (13)

Ensuring exceptional services in the emergency department enhances patient satisfaction. (14)

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Hospitals are motivated to enhance their performance due to the growing need for top-notch healthcare services. (15)

Job happiness is essential in the healthcare industry. Competence is a vital factor in the performance and delivery of excellent services by hospital staff, especially nurses. (16)

The job happiness of nurses is correlated with increased productivity and improved quality of patient care. (17)

This issue has "The following statement has recently come to attention." to attention due to the significant death rate among healthcare professionals of other newly developing diseases, such as MERS-COVID and drug-resistant tuberculosis. Although nurses face a substantial risk of contracting infectious diseases, their compliance with infection control measures is insufficient. (18)

Numerous studies have reported a high prevalence and escalating rates of anxiety and depression among frontline health. "The following statement has recently come to my attention. "Care workers worldwide during the pandemic. These studies have also revealed that health workers are generally dissatisfied with their jobs. (19)

Several variables influence an employee's job happiness, such as external testimonials, a competitive wage, testimonial or professional support, respect, and awards. (20)

Ensuring client happiness with health services has become a crucial aspect of delivering high-quality care that is widely accepted. Satisfaction is a significant indicator of service utilization, as customers must use services, adhere to treatments, and maintain an ongoing relationship with practitioners. (21)

Personal communication plays a crucial and dynamic role within an organization. When communication is effective, it fosters a sense of motivation among personnel, leading to an increase in performance. This is achieved through exchanging information and knowledge, equipping individuals with the necessary skills to fulfill their responsibilities. The user's text is. (22)

### METHODOLOGY

#### 1. Ethical Consideration

Permission has been obtained from the Baghdad health directorate to ensure their acceptance and cooperation and to arrange for the administration of the teaching hospital to study and nurses who have agreed to participate in the study.

#### 2. Design and Setting of Study

A Descriptive study related to assessing the level of nurse burnout in the emergency departments. At three Teaching Hospitals in Bagdad Province, Iraq. They initiated from (September 2023 to February 2024). This study was conducted through a purposive sample (120) of nurses working in emergency teaching hospitals using a data collection instrument collected through a combination of self-reported surveys and observations.

#### 3. Instrument of Study

The researcher uses a demographic information data instrument, and the Maslach Burnout Inventory 1996.

#### 4. Reliability of the instrument

The study instrument's reliability was assessed using the Statistical Package for Social Science Program (IBM SPSS) by applying Cronbach's Alpha.

#### 5. Statistical Analysis

The present study's data is analyzed using the Statistical Package of Social Sciences (SPSS) version (26.0). The following statistical data analysis approaches were used to analyze and assess the study's results. The researchers used descriptive and inferential data analysis to obtain results.

### Discussion

#### Table (1):

Characteristics of the samples indicated that, according to the study's findings, more than half of the nurses (53.3 %) were all males; this finding is supported by the Relationship Between Burnout and Quality of Care in Nurses in Banten; approximately 70% were males. And the educational level diploma score. (23) Concerning educational levels, most of the sample nurses (51.7%) were in the nursing field. Graduated from diploma Furthermore,



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secondary nursing school graduates are a minority (33.3%); this finding is supported by (Qadir et al., 2015), who found in their study that the majority of the sample was male (61.4%). (24)

In terms of age, the findings of this research indicate that most nurses are in the age group of (20\_29) years. This result agrees with the study on burnout and its determining factors among nurses in private. (25)

This result differs from the results of Jubair, which show that most studied subjects were (22-28) years old. (26)

The results of the present study revealed that the number of years of experience in nursing (45.8%) of nurses is less than (1-6) years, while the period of working in the current department was the majority for six years and less. In a cross-sectional study of the Prevalence of burnout syndrome among nurses in general hospitals, he tested the data analysis indicating that nurses had (1-5) years' experience in nursing. This result agrees with the study on the prevalence of burnout syndrome among nurses in general hospitals in provincial East Java. (27)

### table (2): Levels of Burnout among Nurses

Regarding the burnout levels, the majority of the study sample (64.2%) had a moderate level of burnout. This result was agreed with Jubair et al. Quality of Care among Neophyte Nurses at Emergency Units The results indicated that most nurses had a moderate level of self-efficacy in the study, which was associated with burnout levels among them. (28)

I agreed with Queirós et al. (2019), who compared burnout levels and job demand among nurses between Portugal and Italy; their data analysis indicated a moderate level of job burnout among nurses. Another research result is that Burnout is high; It was verified that 59.4% of the nurses presented total Burnout, assessing the level of Burnout among nurses in a general emergency department. (29)

Feleke et al. indicate (that 56.5%) of them reported suffering from a high level of burnout from night duty shift, excessive], staff shortage, persistent interpersonal conflict, and nurses' poor health demonstrated a statistically significant association with professional burnout. (30)

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Other research results indicate low levels of burnout towards moderate Bešević-Ćomić et al. at., (2014). (31)

### **Table (3): Assessment of Burnout Related to Emotional Exhaustion Items**

Most of the study participants experience moderate levels of emotional exhaustion. According to the Multidimensional Theory of Burnout, stress knowledge is embedded in a complex social association, including the individual's perception of self and others. (32)

In items (2,7), the high result in item (2) was (2.52); evaluation of this item is moderate in emotionally exhausted in work for the emergency department. However, items (1,3,4,5,6,8,9,10) were moderate, and item (4) was (1.75), where its evaluation is low in the emergency nurses, which supported the study Quantification of burnout in emergency nurses. (33)

The prevalence of burnout syndrome is high, with most front-line nurses suffering from moderate to severe burnout. (34)

Caregivers are the first responders to disasters. The magnitude of responsibility and immediate crisis response tasks often overwhelm them. Exposure to other traumas, including severe accidents, abuse, assault, combat, or rescue work, all of these things cause emotional exhaustion. (35)

### **Table (4): Assessment of Burnout related to Personal Achievement Items (N=120)**

Regarding personal accomplishment, more than half of the study participants experience a moderate level of Personal achievement. Maslach (2001) stated that reduced personal accomplishment and lowered self-efficacy have been connected to depression and an incapability to cope with the demands of work. It can be worsened by a deficiency of social support and chances to develop professionally. (32)

According to the Multidimensional Theory of Burnout, most study participants experience moderate levels of personal achievement. Items (2,7) had the highest results in items (1,2,5,7,9,10), and in items (7,10), it was (1.63); evaluation of this item is moderate in

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Personal Achievement. However, items (3,4,6,7,8,11,12,13,14) were moderate, and item (14) was (2.22), where its evaluation is moderate in the emergency nurses, which supported the study.

### **Table (5): Assessment of Burnout related to Depersonalization Items**

The current study's findings indicated that most participants experience a moderate level of depersonalisation. Maslach (2001) argued that workload Depersonalization improves in reaction to excess emotional weariness. The connections are the basis of both emotional stresses and rewards; they can be a source for coping with professional stress, and they often tolerate the burnout of the bad symptoms of burnout. This finding is consistent with research on Burnout Syndrome - Assessment of a Stressful Job among Intensive Care Staff, which found that employees in the emergency room experienced a moderate degree of depersonalisation. (36)

### **Table (6): Significant Difference in Burnout among Nurses about their Age**

Results of the present study indicate significant differences in personal achievement among nurses in terms of age. Some studies had similar results, showing moderate levels of emotional exhaustion and personal accomplishment and low levels of depersonalization. Age, years of experience, and professional title had a significant positive relationship with Emotional Exhaustion and Personal Accomplishment. (37)

Another result disagreed with the study conducted by Age as a Risk Factor for Burnout Syndrome in Nursing Professionals. Another study's results indicated a significant inverse association between Age and the burnout dimensions of emotional exhaustion and depersonalization. That led us to conclude that older nurses showed lower emotional exhaustion and depersonalization levels than younger nurses. Reduced personal accomplishment had no significant association with Age. (38)

### **Table (7): Significant Difference in Burnout among Nurses about their Sex**

There is no significant difference in psychological burnout among nurses about their sex. This result agrees with the study of burnout

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in nurses working in China. (39) In the Burnout and Socio-demographic Characteristics of Nurses in Iran, Results indicated a significant relationship between burnout and educational level. (40)

### **Table (8): Significant Difference in Burnout among Nurses about their Qualification in Nursing**

The study results indicate significant differences in overall burnout among nurses regarding qualifications and depersonalization. A Burnout Among Nursing Staff study at Ziaieian Hospital supported this result. The severity of emotional exhaustion, depersonalization, and individual performance impairment was greater in staff with a higher degree. (41)

In the study on the mental health status of mental health nurses in China, Results It was found that educational level was associated with the risk of burnout. Moreover, nurses' education level was negatively associated with depersonalization. (42)

Another result that disagreed with the study was that they found no relationship between the level of education and burnout among nurses. (43)

### **Table (9): Significant Difference in Burnout among Nurses about their Years of Experience in Emergency Units**

There is no significant difference in psychological burnout among nurses based on their years of service in emergency units. This result corresponded with the study's finding in Palestine, indicating no significant statistical differences between mean practice scores and years of experience. (97)

## **Conclusions:**

Based on the results presented and their discussion, the researcher has made the following conclusions:

1. This study concludes that nurses have moderate levels of burnout.
2. There was no statistically significant difference between sex, experience years, and burnout—however, there was a significant difference between burnout and age and qualification.

## **Recommendations:**

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1. Apply for programs in continuing education and use strategies to deal with burnout.
  2. Expanding the scope of the future study in emergency units.
  3. Motivating emergency nurses through appreciation and praise.
  4. Adjusting the work system to suit the work pressure in emergency units.
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**Table (1): Distribution of Nurses According to their Socio-demographic Characteristics**

List	Characteristics	f	%	
1	<b>Age (year)</b> M±SD= 31 ± 10	20 – less than 30	77	64.2
		30 – less than 40	14	11.7
		40 – less than 50	19	15.8
		50 and more	10	8.3
		<b>Total</b>	<b>120</b>	<b>100</b>
2	<b>Sex</b>	Male	64	53.3
		Female	56	46.7
		<b>Total</b>	<b>120</b>	<b>100</b>
3	<b>Qualification in nursing</b>	Secondary school	40	33.3
		Diploma	62	51.7
		Bachelor	18	15
		Postgraduate	0	0
		<b>Total</b>	<b>120</b>	<b>100</b>

f: Frequency, %: Percentage, M: Mean, SD: Standard deviation

**Table (1): Continued**

List	Characteristics	F	%	
4	<b>Years of experience in nursing</b> M±SD= 9 ± 10	Less than 1	5	4.2
		1 – less than 6	55	45.8
		6 – less than 11	30	25
		11 – less than 16	9	7.5
		16 – less than 21	8	6.7
		21 and more	13	10.8
		<b>Total</b>	<b>120</b>	<b>100</b>
5	<b>Years of experience in current workplace</b>	Less than 1	10	8.3
		1 – less than 6	75	62.5
		6 – less than 11	17	14.2

## Assessment of Burnout among Nurses in Emergency departments

	<b>M±SD= 5 ± 6</b>	11 – less than 16	12	10
		16 – less than 21	3	2.5
		21 and more	3	2.5
		<b>Total</b>	<b>120</b>	<b>100</b>
6	<b>Participation in training courses</b>	Not participated	28	23.3
		Inside Iraq	92	76.7
		Outside Iraq	0	0
		<b>Total</b>	<b>120</b>	<b>100</b>
7	<b>Number of training courses inside Iraq</b>	None	28	23.3
		1 – 3	73	60.8
		4 – 6	14	11.7
		7 – 10	5	4.2
		<b>Total</b>	<b>120</b>	<b>100</b>
8	<b>Workplace Hospital</b>	Baghdad Teaching H.	60	50
		Shiek Zayid H.	17	14.2
		Al-Kindi Teaching H.	43	35.8
		<b>Total</b>	<b>120</b>	<b>100</b>

f: Frequency, %: Percentage, M: Mean, SD: Standard deviation

**Table (2): Overall Assessment of Burnout among Nurses**

Burnout	F	%	M	SD	Ass.
Mild	36	30	61.00	9.101	Moderate
Moderate	77	64.2			
Severe	7	5.8			
<b>Total</b>	<b>120</b>	<b>100</b>			

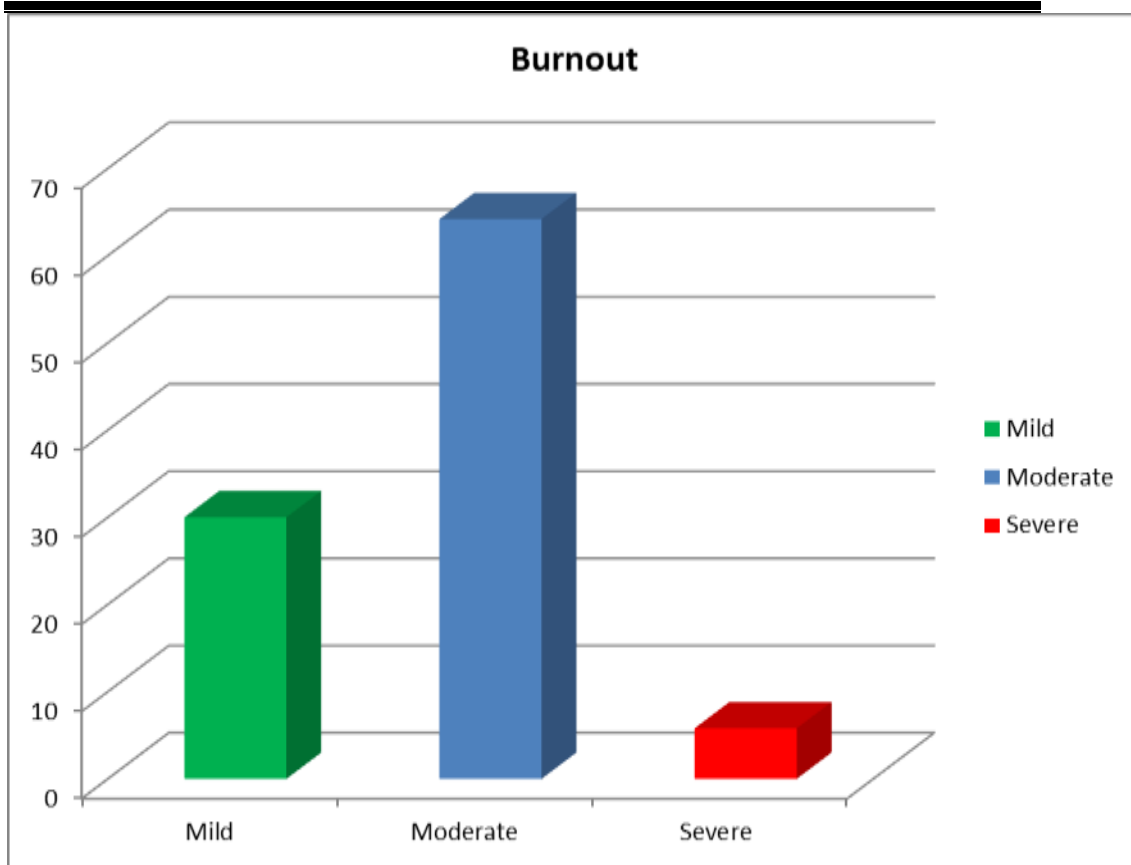
f: Frequency, %: Percentage

M: Mean for total score, SD: Standard Deviation for total score,

Ass: Assessment

Mild= 33 – 55, Moderate= 56 – 77, Severe= 78 – 99

## Assessment of Burnout among Nurses in Emergency departments



**Figure (1): Levels of Infection Control Practices**

**Table (3): Assessment of Burnout related to Emotional Exhaustion Items (N=120)**

List	Emotional exhaustion	Mean	SD	Assess
1	I feel emotionally drained from my work	2.00	.710	Moderate
2	I feel used up at the end of the workday	2.52	.622	Severe
3	I feel fatigued when I get up in the morning and have to face another day on the job	2.22	.676	Moderate
4	I feel like at the end of the rope	1.70	.705	Moderate

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5	I feel burned out from my work	2.06	.725	Moderate
6	I feel frustrated by my job	1.95	.754	Moderate
7	I feel I'm working too hard in my job	2.35	.741	Severe
8	Working with patients puts too much stress	2.18	.648	Moderate
9	Working with people all day is really a strain for me	2.20	.705	Moderate
10	I feel like my work is breaking me down	1.73	.775	Moderate
<b>Total average</b>		<b>2.09</b>	<b>.710</b>	<b>Moderate</b>

f: Frequency, %: Percentage, M: Mean, SD: Standard Deviation

Mild = 1 – 1.66, Moderate= 1.67 – 2.33, Severe= 2.34 – 3

**Table (4): Assessment of Burnout related to Personal Achievement Items (N=120)**

List	Personal Achievement	Mean	SD	Assess
1	I can easily understand how my patients feel about things	1.49	.622	High
2	I feel I'm very effective in dealing with the problem of my patients	1.50	.594	High
3	I feel I'm positively influencing other people's lives through my work	1.68	.688	Moderate
4	I feel very energetic	1.86	.702	Moderate
5	I can easily create a relaxed atmosphere with my patients at work	1.61	.626	High
6	I feel exhilarated after working closely with my patients	1.80	.705	Moderate
7	I accomplish many worthwhile things in this job	1.63	.636	High
8	In my work, I deal with emotional problems very calmly	1.70	.693	Moderate

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9	I am confident that I am able to be efficient and effective in my work	1.52	.673	High
10	I am interested in the people I meet in my work	1.63	.634	High
11	When problem arise at work, I feel able to work with them constructively	1.73	.698	Moderate
12	Nursing makes me feel proud of my self	1.70	.763	Moderate
13	I feel that my practice is very scientific	1.68	.754	Moderate
14	My job provides me with appropriate salary	2.22	.842	Moderate
<b>Total average</b>		<b>1.70</b>	<b>.687</b>	<b>Moderate</b>

f: Frequency, %: Percentage, M: Mean, SD: Standard Deviation  
 Low =2.34 – 3, Moderate= 1.67 – 2.33, High= 1 – 1.66

**Table (5): Assessment of Burnout related to Depersonalization Items (N=120)**

List	Depersonalization	Mean	SD	Assess
1	I feel I treat some patients as if they were impersonal objects	1.41	.667	Mild
2	I've become more callous toward people since I took this job	1.68	.769	Moderate
3	I worry that this job is hardening me emotionally	1.74	.794	Moderate
4	I don't really care for what happens to some patients	1.51	.648	Mild
5	I feel the patients blame me for some of their problems	1.92	.717	Moderate
6	I have become more insensitive to people since I have been working	2.17	.737	Moderate
7	I do not feel the role of the staff is clearly defined	2.13	.751	Severe

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8	We have the opportunity to socialize with each other during the day	2.12	.700	Moderate
9	There is encouragement for teamwork	1.71	.902	Moderate
<b>Total average</b>		<b>1.82</b>	<b>.743</b>	<b>Moderate</b>

f: Frequency, %: Percentage, M: Mean, SD: Standard Deviation  
Mild = 1 – 1.66, Moderate= 1.67 – 2.33, Severe= 2.34 – 3

**Table (6): Significant Difference in Burnout among Nurses with regard to their Age**

Age	Source of variance	Sum of Squares	df	Mean Square	F	Sig.
<b>Burnout</b>	Between Groups	69.230	3	23.077	1.263	.290
	Within Groups	2118.761	116	18.265		
	Total	2187.992	119			
<b>Emotional exhaustion</b>	Between Groups	222.909	3	74.303	2.732	<b>.047</b>
	Within Groups	3155.016	116	27.198		
	Total	3377.925	119			
<b>Personal achievement</b>	Between Groups	68.857	3	22.952	2.375	.074
	Within Groups	1121.009	116	9.664		
	Total	1189.867	119			
<b>Depersonalisation</b>	Between Groups	544.753	3	181.584	2.262	.085
	Within Groups	9311.247	116	80.269		
	Total	9856.000	119			
<b>Overall burnout</b>	Between Groups	68.857	3	22.952	2.375	.074
	Within Groups	1121.009	116	9.664		
	Total	1189.867	119			

*df: Degree of freedom, F: F-statistic, Sig: Significance*

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**Table (7): Significant Difference in Burnout among Nurses with regard to their Sex**

Variable \ Sex		M	SD	t	Df	p ≤ 0.05	Sig
Emotional exhaustion	Male	21.14	4.294	.633	118	.528	N. S
	Female	20.64	4.304				
Personal achievement	Male	24.33	5.578	1.330	118	.186	N. S
	Female	23.04	4.987				
Depersonalisation	Male	16.83	3.425	1.723	118	.087	N. S
	Female	15.84	2.769				
Overall burnout	Male	62.30	9.692	1.689	118	.095	N. S
	Female	59.52	8.211				

M: Mean, SD: Standard deviation, t: t-test, df: Degree of freedom, Sig: Significance, p: Probability value, N.S: Not significant, S: Significant, H.S: High significant



**Table (8): Significant Difference in Burnout among Nurses with regard to their Qualification in Nursing**

Qualification Burnout	Source of variance	Sum of Squares	df	Mean Square	F	Sig.
Emotional exhaustion	Between Groups	52.556	2	26.278	1.440	.241
	Within Groups	2135.435	117	18.252		
	Total	2187.992	119			
Personal achievement	Between Groups	112.470	2	56.235	2.015	.138
	Within Groups	3265.455	117	27.910		
	Total	3377.925	119			
Depersonalization	Between Groups	92.046	2	46.023	4.905	<b>.009</b>
	Within Groups	1097.821	117	9.383		
	Total	1189.867	119			
Overall burnout	Between Groups	582.536	2	291.268	3.675	<b>.028</b>
	Within Groups	9273.464	117	79.260		
	Total	9856.000	119			

*df: Degree of freedom, F: F-statistic, Sig: Significance*

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**Table (9): Significant Difference in Burnout among Nurses with regard to their Years of Experience in Emergency Units**

Burnout	Year	Source of variance	Sum of Squares	df	Mean Square	F	Sig.
Emotional exhaustion		Between Groups	78.258	5	15.652	.846	.520
		Within Groups	2109.734	114	18.506		
		Total	2187.992	119			
Personal achievement		Between Groups	248.864	5	49.773	1.813	.116
		Within Groups	3129.061	114	27.448		
		Total	3377.925	119			
Depersonalisation		Between Groups	90.982	5	18.196	1.888	.102
		Within Groups	1098.885	114	9.639		
		Total	1189.867	119			
Overall burnout		Between Groups	356.078	5	71.216	.855	.514
		Within Groups	9499.922	114	83.333		
		Total	9856.000	119			

*df: Degree of freedom, F: F-statistic, Sig: Significance*