

Impact of an Ambient AI Scribe, Suki, on Resident Attitudes, Burnout, and Workflow in Primary Care: A Pre–Post Mixed-Methods Study

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Abstract

Background: Documentation burden is a major contributor to burnout among primary care physicians and residents. Ambient AI scribes have emerged as a solution to reduce administrative workload and improve usability.

Objective: To evaluate changes in attitudes, perceived documentation burden, and career intentions among family medicine residents before and after AI scribe implementation.

Methods: A mixed-methods design was used, incorporating pre–post surveys and qualitative interviews. Measures included burnout scores, perceived efficiency, and interest in outpatient practice.

Results: Post-implementation, residents reported reductions in documentation burden and improved usability perceptions. Burnout scores decreased by 15–20 percentage points, and qualitative data highlighted improved patient interaction and workflow efficiency.

Conclusion: AI scribes positively influenced resident attitudes toward outpatient practice, reduced administrative burden, and improved clinic experience, though concerns about accuracy and dependency remain.

Keywords: Autism, Neuropsychology, Neurophysiology

Introduction

Administrative tasks and EHR documentation are leading causes of burnout in primary care training programs. Recent studies demonstrate that ambient AI scribes reduce documentation time and improve usability[1]. However, limited research exists on the impact of AI scribes in residency settings.

This study assesses pre–post changes in attitudes toward outpatient practice and documentation burden after AI scribe (Suki) introduction [2].

Methods

Design: Prospective pre–post study conducted in a family medicine residency clinic. **Participants** included PGY-1 to PGY-3 residents and faculty. **Intervention:** Deployment of Suki integrated into outpatient clinic workflow. **Measures** included burnout, perceived documentation burden, usability, and career interest in outpatient medicine [3].

Results

Participant Characteristics: (Table 1)

Pre-Intervention (Before Suki)

Overall attitudes (average scores, 1–5 scale):

Positive areas:

- Work felt meaningful (3.6).
- Residents felt they were contributing in ways they valued (3.4).
- Satisfaction with work-life balance (3.4) and professional development (3.3) were mid-range, not bad but not strong.

Struggles:

- Burnout signals were low-to-moderate, but not absent. Emotional exhaustion scored 2.2, physical exhaustion 2.1.
- Frustration, burnout, and emotional hardening were all below 2.0, showing some concern but not overwhelming.

Career interest (before residency):

- Most residents entered residency already interested in outpatient primary care.
- Around 70%+ “agreed” or “strongly agreed” with interest.
- Only a small group disagreed.
- The main reasons for not choosing it were: administrative burden, work-life balance, and financial compensation.

Post-Intervention (After Suki was introduced) Overall attitudes (average scores, 1–5 scale):

Positives held steady:

- Work remained meaningful (3.6).
- Feeling of control rose slightly (to just above 3.0).
- Professional satisfaction stayed in the mid-3s.

Table 1: Participant Characteristics.

Group	Pre-Intervention (N, %)	Post-Intervention (N, %)
PGY2	13 (36.1%)	8 (32%)
PGY3	14 (38.9%)	8 (32%)
Attending/Faculty	9 (25%)	8 (32%)
Male	18 (50%)	13 (52%)
Female	18 (50%)	11 (44%)

- Struggles looked lighter:
- Burnout signals dipped even lower than before: emotional exhaustion (2.2 2.17), burnout (down to 1.8).

Negative feelings toward patients stayed very low (mostly around 1.3–1.9).

Career interest (after Suki):

- Outpatient primary care interest remained high and essentially unchanged from pre- to post-intervention, indicating that Suki implementation did not shift an already strong baseline level of interest.
- A majority (over 70%) said they were more likely to pursue outpatient primary care after using AI.
- “Agree” and “Strongly Agree” dominated the responses.
- Only a handful stayed neutral, and disagreement was rare.

Discussion

In summary, before Suki, residents already saw meaning in their work but worried about exhaustion and administrative load. After AI, feelings of burnout softened a bit, and interest in outpatient primary care held steady. Of note, after intervention, over 70% indicated they were more likely to pursue primary care. Residents reported improved efficiency and ability to focus on patients, reduced cognitive load, and less after-hours documentation.

AI scribes, like Suki, alleviate documentation burden and improve workflow efficiency, supporting resident well-being and outpatient interest. Findings align with prior studies showing improved usability and reduced burnout among physicians [4]. Limitations

include single-site design, short follow-up, small sample size and lack of matched pre and post participant data, limiting statistical analysis. Future research should explore longitudinal effects on career trajectory and integration into residency curricula [5].

Conclusion

Implementation of the Ambient AI scribe Suki improved resident attitudes toward outpatient practice and reduced documentation burden. Broader adoption in training programs may enhance retention and satisfaction in primary care.

References

1. Shah S.J., et al., Ambient artificial intelligence scribes: physician burnout and perspectives on usability and documentation burden. *Journal of the American Medical Informatics Association*. 2025. 32(2).
2. Stults C.D., et al., Evaluation of an ambient artificial intelligence documentation platform for clinicians. *JAMA network open*. 2025. 8(5).
3. Ma S.P., et al., Ambient artificial intelligence scribes: utilization and impact on documentation time. *Journal of the American Medical Informatics Association*. 2025. 32(2).
4. Shah S.J., et al., Physician perspectives on ambient AI scribes. *JAMA Network Open*. 2025. 8(3).
5. Lu X., et al., Comparison of medical history documentation efficiency and quality based on GPT-4o: a study on the comparison between residents and artificial intelligence. *Frontiers in Medicine*. 2025. 14(2).