

Introduction

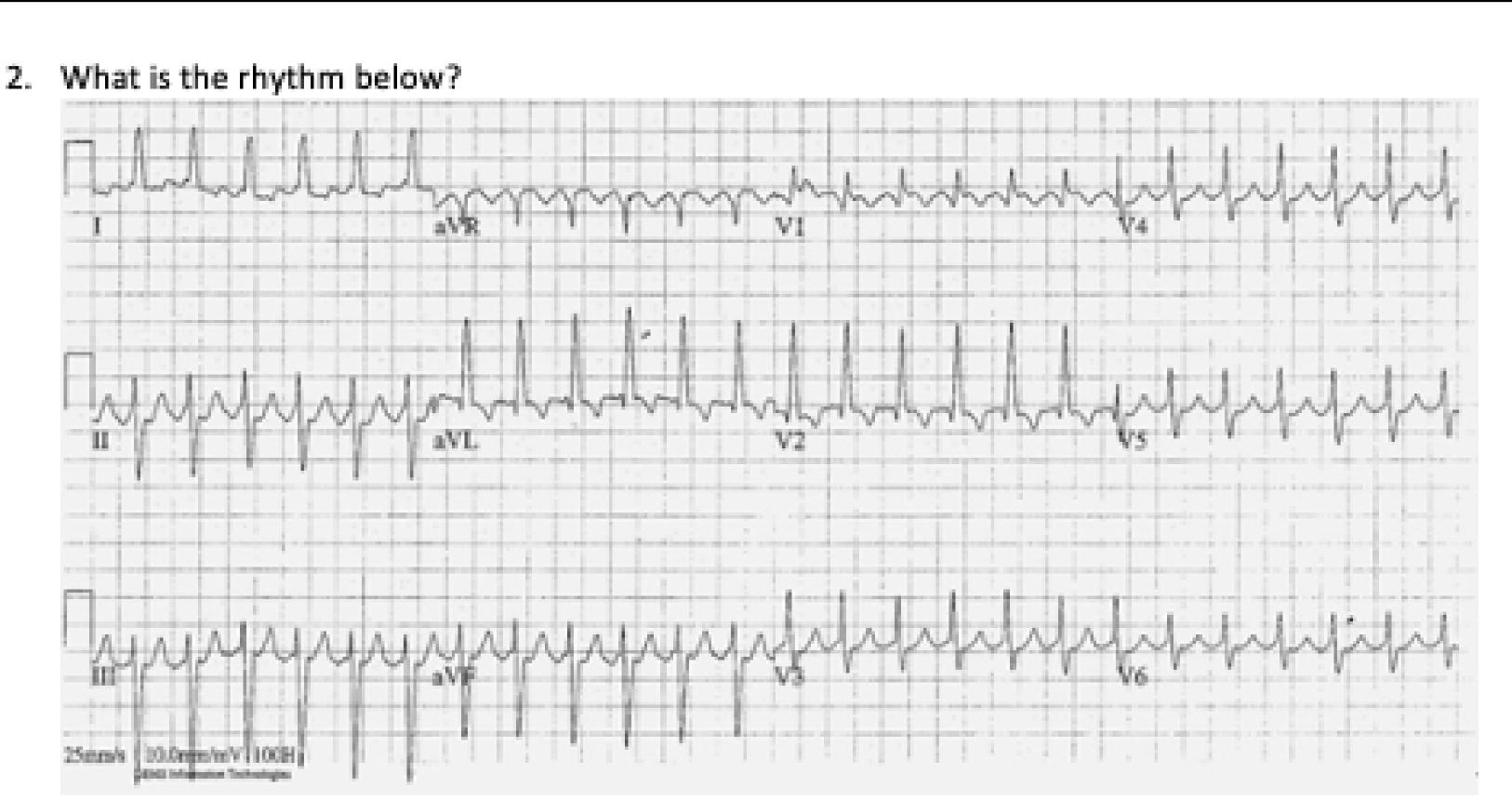
□At WFM residency, our ECG and radiology training is very dependent on what attending you have on your hospital service. Besides hospital services, we don't have any other dedicated ECG and radiology training within our program. This makes it variable as to how much training each resident gets, leading to each having different comfort levels. After a needs assessment was completed, our program felt it was needed to introduce a longitudinal ECG/radiograph training curriculum. There are many examples of the benefits of longitudinal curriculum improving knowledge, accuracy, retention, and application within medical education literature (1,2,3,4).

Methods

Evaluation of Longitudinal EKG/Radiograph Curriculum At Waco Family Medicine Alexandra Mitchell, MD

Waco Family Medicine Institute

Pre/Post Quiz



- Atrial fibrillation
- b. SVT
- c. Atrial flutter 2:1
- Multifocal atrial tachycardia
- On the above EKG (question #2), what could you do clinically to differentiate between the different rhythms listed?

Answer:

Pre/Post Confidence Survey

Confidence Survey

How confident do you feel interpreting EKG's/radiographs?

1	2	3	4	5
Not at all	Slightly	Somewhat	Fairly confident	Very confident
confident	confident	confident		

own interpretations of EKG's/radiographs?

1	2	3	4	5
Not at all	Slightly	Somewhat	Fairly confident	Very confident
confident	confident	confident		

is to evaluate of a maging nce and phs pre- and

'y training and rately read

icine residents

ariable T-test



How confident do you feel making medical decisions for a patient based solely on your

Timeline

sent out in July 2023. in December 2023.

Discussion

residency and programs as well. curriculum as well.

References

This work was supported in whole or in part by a grant from the Texas Higher Education Coordinating Board (THECB). The opinions and conclusions expressed in this document are those of the author and do not necessarily represent the opinions or policy of the THECB.

The pre-implementation quiz and confidence survey will be

The pilot curriculum will then start in July 2023.

The curriculum will be preliminarily evaluated by

discussions with resident groups and modified as needed. The post-implementation quiz and survey will be completed

The statistical analysis will then be run in December 2023.

□ My curriculum is designed specifically for WFM Residents due to a needs assessment within the program finding it to be an area of deficiency within our curriculum.

□ I hope that if there are good results from the evaluation of the curriculum using this research project, it can:

1) become a more permanent curriculum within our

 \Box 2) be a curriculum that can be used by other residency

There have been many examples of longitudinal programs within medical education making a huge impact for the learner, and the hope is for that to be the case for this

□ Kelm, D.J, Ratelle, J.T., Azeem, N., Bonnes, S.L., Halvorsen, A.J., Oxentenko, A.S., Bhagra, A. Longitudinal Ultrasound Curriculum Improves Long-Term Retention Among Internal Medicine Residents. J Grad Med Educ (2015) 7 (3): 454–457. UWest, C.P., Jaeger, T.M. & McDonald, F.S. Extended Evaluation of a Longitudinal Medical School Evidence-Based Medicine Curriculum. J GEN INTERN MED 26, 611–615 (2011).

Reilly JB, Ogdie AR, Von Feldt JM, et al. Teaching about how doctors think: a longitudinal curriculum in cognitive bias and diagnostic error for residents. BMJ Quality & Safety 2013;22:1044-1050.

Pohl SD, Van Hala S, Ose D, Tingey B, Leiser JP. A Longitudinal Curriculum for Quality Improvement, Leadership Experience, and Scholarship in a Family Medicine Residency Program. Fam Med. 2020;52(8):570-575. □ Salkind, N.J., Frey, B.B. Statistics for People Who Think They Hate Statistics. Thousand Oaks, CA, SAGE, 2022.