

2020 UNTHSC Conclave Resident Poster Session Form

To submit and present your poster at the 2020 UNTHSC TCOM Educational Conclave,
you must return both pages of this document.

1. On this Page:

Fill in the following information

*Please be sure to include all relevant information and titles of all associated participants

Main Contact:

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Include main contact email to receive information about Conclave and the Poster session

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2. On the Next Page:

Fill in all of the information for your abstract on the following page.

This abstract will be published in the proceedings

This abstract will be provided to the judges a week before the poster session. Judges will ask you questions about your research.

Please keep the font at 10 Calibri

There is not a maximum or minimum word count, however, **your abstract is limited to one page.**

Poster information will follow when an abstract submission is accepted

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A Second Glance at the Effectiveness of the Current Preliminary Tracks: A National Survey of Previous and Current Residents from the Medical City Weatherford Preliminary Internal Medicine Program.

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BACKGROUND/INTRODUCTION:

Out of the 53 types of medical specialty residencies listed on the Fellowship and Residency Electronic Interactive Database Access (FREIDA), 10 (18.9%) medical specialties – including Anesthesiology, Dermatology, Physical Medicine and Rehabilitation (PM&R), and Radiology – often require a resident to complete a separate PGY1 internship year before matriculating into their PGY2 position at their advanced program. Typically, these residents complete a 1-year Transitional, Preliminary Internal Medicine (IM) or Preliminary General Surgery program. Medical City Weatherford (MCW) created a Traditional Rotating Internship program in 2016, which then transitioned into a Preliminary IM program in 2018 as MCW became an ACGME-accredited residency. With the creation of the Preliminary IM program came the inception of the preliminary tracks – 5 preset specialty-specific rotations tailored to each resident’s respective advanced specialty. The purpose of this study was to analyze each preliminary track’s effectiveness in preparing residents for their respective advanced specialties.

METHODOLOGY:

The authors designed a Google Form survey with 11 questions to assess each resident’s satisfaction with the preliminary tracks, whether to keep or replace particular rotations, and suggestions for additional rotations that should be included. The survey was sent to all 33 previous and current preliminary residents who have participated in MCW’s preliminary tracks: Anesthesiology, Dermatology, PM&R, or Radiology. Results were compiled by synthesizing the data provided by each respondent.

RESULTS:

Of the 33 residents, 22 (66.7%) responded to this survey – 100% of current residents and 47.6% of previous. Nearly all (95.5%) reported being satisfied with the specialty-specific rotations, but a majority (81.8%) also said that, if given the opportunity, they would alter the built-in rotations. Residents within the Anesthesiology Track voted to keep their current rotation schedule, while Dermatology voted to replace 2 rotations, PM&R to replace 3 rotations, and Radiology to replace 1 rotation.

CONCLUSION/DISCUSSION:

To the authors’ knowledge, the Preliminary IM program at MCW is the only one in the nation that provides specialty-specific rotations that are automatically built into each preliminary resident’s schedule. With that in mind, this new way of training preliminary residents is still a work in progress, as the majority of previous and current residents would alter the rotations in some way. Future studies will be needed as the previous, current, and future residents progress in their training and become attendings, to see if these specialty-specific rotations actually made a difference and if they should again be altered to better fulfill the training needs of the residents.

REFERENCES:

1. American Medical Association. Fellowship and Residency Electronic Interactive Database Access. 2020. Retrieved from <https://freida.ama-assn.org/Freida/#/>