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Don't get left behind! Creating an internal medicine outpatient POCUS curriculum for residents and preceptors

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Keywords

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Abstract

While point-of-care ultrasound (POCUS) is used frequently in certain settings such as the Emergency Department and the Intensive Care Unit (ICU), integration into ambulatory clinical practice is variable. There is limited outpatient POCUS experience for internal medicine residents and preceptors as well as no standardized education. There is often a learner-supervisor knowledge gap given the only recent introduction of POCUS into medication education. Furthermore, there are gaps in knowledge about the ideal curriculum targeted towards trainees versus faculty – how to balance didactic/hands on time, how to perform ongoing quality assurance, and so on. Literature review finds multiple professional organizations issuing consensus statements encouraging the use of POCUS within the field of internal medicine. As a result, societies including the Alliance of Academic Internal Medicine (1), the American Academy of Family Physicians (2), and the American College of Physicians (3) have supported incorporating POCUS education into residency training.

However, there has been little focus on the incorporation of POCUS into outpatient practice and outpatient-focused residency curricula within internal medicine residency programs. It has been hypothesized that POCUS use has the potential to improve patient care, patient satisfaction, physician job satisfaction, patient-physician relationships, and cost containment. It is the author's belief that these benefits would be amplified particularly in the outpatient setting, although there are numerous barriers including faculty experience, resources, and time (4,5). The goal of this preliminary study is to develop and begin to deliver an ambulatory POCUS curricula for residents and faculty preceptors. We plan to retrospectively measure changes in POCUS knowledge and attitudes, evaluate satisfaction with the educational curriculum and number of learners reached, and the number of POCUS exams performed in clinical settings over time. We will use this data to iterate for future delivery of this curriculum in various outpatient settings.

Learning Objectives

1. Develop an ambulatory-focused point-of-care ultrasound curriculum for internal medicine residents and precepting faculty
2. Deliver this educational curriculum, track the number of learners reached, and retrospectively assess pre/post knowledge, attitudes, and behaviors related to POCUS.
3. Tailor a precepting faculty curriculum that is “cognitive” (6), allowing faculty to supervise POCUS use without having all of the hands-on skills that residents require.
4. Begin to iterate evidence-focused curricula to varied ambulatory settings (geriatric; low-resource; academic).

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