

A Four Week Residency Preparation Course: "Boot Camp" Description and Early Outcomes Scott Kelley MD, Julie Blaszczak MD, Anna Laurie MD

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BACKGROUND

- Literature pertaining to residency preparation courses (RPCs) or "boot camps" dates back to at least 2004¹
- There is growing acceptance of RPCs²
 - Better prepares medical students for day one of internship
 - Mitigate safety concerns around a "July Phenomenon"
- RPC soon to be required for all graduating students from Michigan Medicine, so there was a mandate to develop a course for Family Medicine
- Previously described RPCs for primary care were ≤ 2 weeks, but we believe this would be the first 4 week transition course in Family Medicine (FM)⁴⁻⁶

METHODS

- Course Outline
 - Created using an iterative process
 - Utilized focus groups of interns and residency leadership within our department
 - Matched the most desired skills and knowledge with faculty well equipped to instruct in those areas
- Course Content
 - Medical knowledge review
 - Clinical simulations of procedures
 - Suturing, with students given suture kits & video resources for practicing suture/knot tying
 - Mock paging curriculum
 - Piloted with six paging cases
 - Created and previously vetted by faculty and students in our institution's Departments of Ob/Gyn, Internal Medicine, and Pediatrics
 - Addressed the breadth of Family Medicine, including inpatient and outpatient settings
- Assessments
 - Pre/post survey of students' knowledge
 - 100 item test from Aquifer Family Medicine
 - Pre/post survey of student's attitudes
 - Brief survey
 - Performance feedback, qualitative & quantitative
 - 1. Mock paging cases, including
 - rapport with the caller (a nurse confederate)
 - addressing critical issues
 - avoiding pitfalls
 - 2. Simulated procedure competence
 - 3. Pre/post time measurements of two handed tie and instrument tie

Date	Time	Topic
	8A-9A	Intro, Orientation
Mon/5	9A-12P	Pre-test (Aquifer)
WIOH	1-2P	Approach to Respiratory Emergencies
	2-5P	Respiratory Cases & Colonoscopy
	9A-10A	Approach to Paging
	10A-12P	Screening (HME)
Tues/6	1P-2P	Resilience
	2P-4P 4P-5P	NG Tube and IV placement Intro to Individual Development Plan
Wed/7	10A-12P	Lumbar Puncture
	1P-3P	Billing/coding Basics
	8A-12P	Thoracentesis (with IM)
Thurs/8	1-2:30P	Resident as Teacher
	2:30-5P	Self-directed learning (e.g., develop chalk talks)
Fri/9	8A-12P	Co-precepting (Chelsea) KM, ES, SW
	1P-5P	Co-precepting (Chelsea) YB, BD, MK
Date	Time	Topic Topic
	10A-12P	ACLS Intro
Mon/12	1:30-5	ACLS Cases
	9A-12P	NBME Health System Science Exam
Tues/13	1P-3P	Efficiency, Intern Survival Skills
	3P-5P	Self-directed learning (e.g., iSim)
	8A-10A	Fam. Med. Grand Rounds
Wed/14	10A-12P	FM Resident Conference
	1P-5P	FAST/Abdominal Ultrasound
	04 10:30	Duefe esi e realiene
	9A-10:30 10:30-12	Professionalism Communication Skills (with staff and agenda setting w/ pts.)
Thurs/15	10.30 12	Communication skins (with start and agenda setting wy pts.)
	1P-4P	Perineal Repair and OB Ultrasound
		NAATCII DAY — na nasida na su nanana a stirriti a a saba dula d
Fri/16		MATCH DAY – no residency prep activities scheduled
Date	Time	Topic
	104 120	
Mon/19	10A-12P 1P-5P	Note Writing Co-precepting (Chelsea) CL, NZ
111011, 13		
Tues/20	10A-12P 1P-5P	Paracentesis Solf directed learning (e.g., Aquifor cases)
	11-25	Self-directed learning (e.g., Aquifer cases)
	9A-11A	Difficult Conversations (Breaking Bad News)
Wed/21	11A-12P 12:50-1:50	EBM Overview Priarwood All Toam Mooting
	2-3P	Briarwood All Team Meeting Chalk Talks
	9A-10A	Outpatient Management of Chronic Disease
Thurs/22	10-10:30	Break/Room Change
111413/22	10:30-12	Anx/Dep/Mental Illness
	1P-5P	Self-directed learning
	0.10	Shock
	9-10 10-11:30	Shock Central Lines
Fri/23		
Fri/23	10-11:30 11:30-1:30 1:30-3	Central Lines Individual feedback Paging Debriefing
·	10-11:30 11:30-1:30 1:30-3 3-5	Central Lines Individual feedback Paging Debriefing Self-directed learning
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·	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam
·	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P 2P-3P	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam Delirium
Date	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam Delirium Signout/Cross Coverage
Date	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P 2P-3P 3P-3:40	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam Delirium
Date	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P 2P-3P 3P-3:40 3:40-4:20 4:20-5P	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam Delirium Signout/Cross Coverage Stress Testing + Pre-operative Exam Bugs and Drugs
Date	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P 2P-3P 3P-3:40 3:40-4:20 4:20-5P 9A-12P	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam Delirium Signout/Cross Coverage Stress Testing + Pre-operative Exam Bugs and Drugs Self-directed learning
Date Mon/26	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P 2P-3P 3P-3:40 3:40-4:20 4:20-5P	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam Delirium Signout/Cross Coverage Stress Testing + Pre-operative Exam Bugs and Drugs
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Date Mon/26 Tues/27	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P 2P-3P 3P-3:40 3:40-4:20 4:20-5P 9A-12P 1P-5P 8A-10A 10A-12P 1P-2P	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam Delirium Signout/Cross Coverage Stress Testing + Pre-operative Exam Bugs and Drugs Self-directed learning Self-directed learning Self-directed learning Fam. Med. Morbidity and Mortality Conf. FM Resident Conference Cervical Cancer Screening
Date Mon/26	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P 2P-3P 3P-3:40 3:40-4:20 4:20-5P 9A-12P 1P-5P 8A-10A 10A-12P	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam Delirium Signout/Cross Coverage Stress Testing + Pre-operative Exam Bugs and Drugs Self-directed learning Self-directed learning Self-directed learning Fam. Med. Morbidity and Mortality Conf. FM Resident Conference Cervical Cancer Screening Vaginitis
Date Mon/26 Tues/27	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P 2P-3P 3P-3:40 3:40-4:20 4:20-5P 9A-12P 1P-5P 8A-10A 10A-12P 1P-2P 2P-3P	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam Delirium Signout/Cross Coverage Stress Testing + Pre-operative Exam Bugs and Drugs Self-directed learning Self-directed learning Self-directed learning Fam. Med. Morbidity and Mortality Conf. FM Resident Conference Cervical Cancer Screening
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Date Mon/26 Tues/27	10-11:30 11:30-1:30 1:30-3 3-5 Time 10A-12P 1P-2P 2P-3P 3P-3:40 3:40-4:20 4:20-5P 9A-12P 1P-5P 8A-10A 10A-12P 1P-2P 2P-3P 3P-4P 4P-5P	Central Lines Individual feedback Paging Debriefing Self-directed learning Topic OB Triage, Day 1 L&D Death Exam Delirium Signout/Cross Coverage Stress Testing + Pre-operative Exam Bugs and Drugs Self-directed learning Self-directed learning Fam. Med. Morbidity and Mortality Conf. FM Resident Conference Cervical Cancer Screening Vaginitis Contraception 101 Self-directed learning

Good Friday and start of Passover

| Wrap up, post test (Aquifer)

Well Child Exam

Self-directed learning

11A-12P

Fri/30

Figure 1. Schedule

RESULTS

Demographics

- 8 total student participants
 - All fourth year medical students
 - 4 male, 4 female
- All applied to Family Medicine
- All matched to Family Medicine

Mock Paging Curriculum

- No students performed
 - any "must not do" interventions
 - all of the "must do" and "should do" interventions
- Students received
 - direct feedback from callers and group debrief
 - materials detailing what would have been expected

Selected Pre- and Post-Course assessments (total $N=8$)							
Pre- and Post-Course Test Results on Aquifer FM Cases							
	N	Pre-Test mean	Post-Test mean	P value			
	8 (100%)	73.5	76.0	0.42			

	N	Pre-Course Mean	Post-Course Mean	P value
Preparedness for intern year	4 (50%)	3.5	3.25	0.39
Ability to effectively evaluate/manage most inpatient cross-cover issues	4 (50%)	2.0	3.5	0.058

Pre- and post-course measurements of suture tying							
	N	Pre-Course Mean (s)	Post-Course Mean (s)	P value			
Instrument tie	7 (87.5%)	79.9	47.4	0.0998			
Two-handed tie	7 (87.5%)	40.4	13.6	0.13			

Student Course Evaluations

Narrative feedback included several themes:

-Students wanted more lectures and less simulation time

"More outpatient chronic disease lectures," "Lectures that act as a review of medical school would actually be pretty useful," "Combine the Sim Center...into just a couple sessions").

-Students liked teaching and learning from each other

"Chalk talks were really useful. Doing 2-3 rounds might be great"

-Students were not fond of the Aquifer exam or cases

("Eliminate the pre-/post-testing as it did not feel useful," "There was substantial downtime...I personally did not like the [Aquifer] modules").

- Students liked mock paging, but did not like being on-call the majority of the rotation

"The paging curriculum was fantastic"

CONCLUSIONS

- RPCs are appreciated by students and teaching faculty alike²
- We created a novel four week long pilot course that can serve as a launching point for further development and study
- Future iterations are expected to contain more paging cases and more didactics, including students presenting to each other in the form of brief "chalk talks"

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