UC Irvine
Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health

Title

Utilizing E-Value as a Novel Approach to Create Small Group Modules and Review Completed Resident Coursework

Permalink

https://escholarship.org/uc/item/7vq9c49n

Journal

Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health, 17(4.1)

ISSN

1936-900X

Authors

King, Andrew
Gibbons, Emily
Miller, Lori
et al.

Publication Date

2016

Copyright Information

Table 1.

Total Textbook Chapters Provided	39	Total FOAMed Items Provided	110
PGY-1			
Mean Chapters Read	19	Mean FOAMed Items Read	18
Median Chapters Read	17	Median FOAMed Items Read	16
Standard Deviation	12	Standard Deviation	14
Range	2 - 39	Range	1 - 48
PGY-2			
Mean Chapters Read	12	Mean FOAMed Items Read	10
Median Chapters Read	10	Median FOAMed Items Read	4
Standard Deviation	10	Standard Deviation	12
Range	0 - 39	Range	0 - 40
PGY-3			
Mean Chapters Read	5	Mean FOAMed Items Read	15
Median Chapters Read	3	Median FOAMed Items Read	9
Standard Deviation	5	Standard Deviation	20
Range	0 - 14	Range	0 - 77

Table 1. Consumption of Textbook Chapters and "FOAMed" Content by Post-Graduate Year (Sample Size: 16 Weeks; 14 Residents Per Post-Graduate Year)

73 Utilization of Educational Blogs to Supplement Self-Directed Learning and Small Group Based Didactic Sessions

King A, Adams D, Barrie M/Ohio State University, Columbus, OH

Background: The current generation of learner uses free open access medical education (FOAMed) such as blog posts, podcasts, Twitter and Facebook alongside traditional teaching methods such as textbooks and conference lectures to advance their knowledge of emergency medicine. The emergency medicine residency curriculum at The Ohio State University lacked any formal education to guide participation in the FOAMed community. We developed a system to publish regular posts on a departmental blog site to promote digital scholarship.

Educational Objectives:
1. Critically evaluate online sources for accuracy and applicability to emergency medicine practice.
2. To generate scholarly articles or blog posts appropriate for an emergency medicine audience.
3. Develop digital professionalism.

Curricular Design: Four residents were recruited as editors for the department blog site. They worked with

the residency to generate scholarly blog articles with a goal to post one article per week. Topics could be related to the conference curriculum, interesting clinical cases, recent publications, or other areas of personal interest. The resident editors generated draft blog posts and then attending physicians edited for accuracy and readability. Attending editors removed any potential protected health information. Published posts were distributed on the department list serve and advertised on twitter. Since inception in September 2015, residents and attendings published 10 blog posts with 3427 views and 1995 visitors from 10 different countries. Residents that have participated in the process have felt a great sense of accomplishment and were engaged in the material more than typical lecture style teaching.

Impact/Effectiveness: The modern resident engages with online learning and discussion. Medical students and residents need instruction on how to navigate this online community and how to be active participates in digital scholarship. Through organizing regular posting on a departmental blog, a few resident editors have felt great accomplishment, honed skills of digital scholarship, and developed digital professionalism. Limitations include reaching the entire resident body, as only motived and interested learners participate regularly in the blog post production and discussion.

74 Utilizing E-Value as a Novel Approach to Create Small Group Modules and Review Completed Resident Coursework

King A, Gibbons E, Miller L, Harr-Weatherby E/Ohio State University, Columbus, OH

Background: The flipped classroom learning approach is recognized as the preferred curricular model in medical education. Our residency didactic curriculum is based on the flipped classroom design with small group discussions rather than traditional lectures to teach the core content of emergency medicine. Learner preparation is vital to maximize their mastery of weekly core content topics; therefore, methods to review completed assignments are necessary to ensure curricular success.

Educational Objectives:
1. Customize and utilize E-Value, our institution's chosen electronic organization system for medical education, as a didactic curriculum manager and method to create small group modules to be completed by resident learners prior to small group discussions.
2. Utilize E-Value to review completed resident coursework and provide feedback to the learners.

Curricular Design: Our residency program coordinator worked closely with E-Value developers to customize the interface to specifically meet our curricular needs. As curricular material is created by education faculty, small group

modules are created in the E-Value interface. Learners are required to review objectives, read weekly assigned material and list any additional evidence based medicine resources used to learn the material, submit one remaining question after reviewing material, and submit an ABEM style question utilizing the designed small group modules on E-Value platform. Facilitating faculty can review remaining questions in E-Value to enhance small group discussions. Independent learning plans (ILP), meant to foster self-directed learning in our residents, are completed on E-Value by resident learners. ILP force learners to record a question that developed during small group sessions, and to seek and provide an answer to the question posed.

Impact/Effectiveness: E-Value developers allowed residency leadership to innovate their interface in order to develop weekly small group modules to be completed online. Material was easily and efficiently completed and reviewed by residents and education faculty. Our novel innovation to this well established medical education platform allowed us to keep all education materials in a single, centralized platform. Our design ensured learner accountability in completing the curricular material, and allowed faculty to send prompt feedback to resident learners via E-Value.

Figure 1.

Best of the Best Oral Presentations

---

1 **Residency Applicants Prefer Exact Timelines of Interview Offer Release Dates Over Rolling Admissions**

Hern H, Alter H, Duong D, Gisondi M, Roche C, Trivedi T, White M, Wills C /Alameda Health System - Highland Hospital, Berkley, CA

Background: In Emergency Medicine, it is not uncommon for applicants to feel anxiety about applying to or interviewing at enough programs. There is a concern among program directors, that some applicants might be accepting more interviews than they can realistically go to. In the 2015-16 application cycle, some programs agreed to have a uniform release date of invitations to interview in an attempt to limit the number of excess invitations held.

Objectives: The purpose of this investigation is to examine the effect of unified release dates on the medical student satisfaction as compared to traditional individual program determined release dates as well as the rates of double booking of interviews.

Methods: This is a retrospective analysis performed on a sample of US medical students applicants at any of the 4 Emergency Medicine Residency Program sites participating in the study, 2 of which used a uniform release date, 2 did not. Results analyzed using test of proportions analysis.

Results: There were 555 responses out of 1464 US seniors surveyed (37.9%). Of respondents, 50.1% applied to more programs than their advisor recommended and 45.6% applied to the number recommended. When asked if they ever double booked 2 interviews for the same day, 31.6% replied they had and 6.9% did it 3 or more times. Applicants who were AOA were more likely to have "double booked" interviews (46.1% (41/89) vs. 28.7% (129/449) applicants p=0.001.) Applicants prefer an established date by each program on when they offer interviews. 78.9% listed an established date (either uniform or non-uniform) as their highest preference. Only 15.7% of students reported no preference as their 1st or 2nd preference. Rolling basis interviews were not popular with 59.5% of students placing this as their 3rd or 4th choice.

Conclusions: Applicants tend to schedule more interviews than their EM advisor recommends. In addition, over 30% doubled booked interviews for the same day and AOA applicants were more likely to do so. Finally, rather than a universal date or rolling date, applicants preferred to know the explicit timeline of the interview offers.
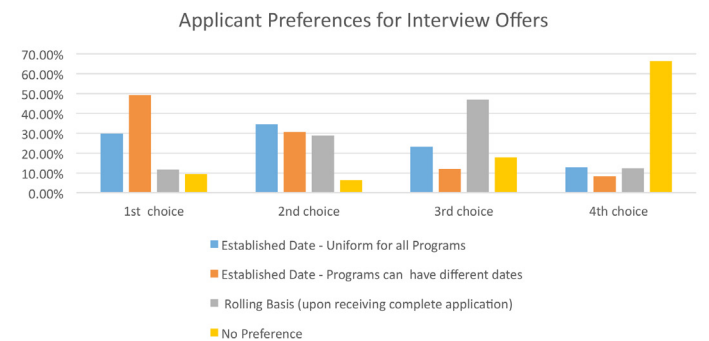

Figure.

---

2 **Impact of Doximity Residency Rankings on Emergency Medicine Applicant Rank Lists**

Peterson W, Hopson L, Khandelwal S, Gallahue F, White M, Burkhardt J, Rolston A, Santen S /University of Michigan, Ann Arbor, MI; Ohio State University,