

## **UC Irvine**

### **Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health**

#### **Title**

Preparing for Discharge: A Workshop on Communicating Diagnostic Uncertainty

#### **Permalink**

<https://escholarship.org/uc/item/80b418nr>

#### **Journal**

Western Journal of Emergency Medicine: Integrating Emergency Care with Population Health, 23(4.1)

#### **ISSN**

1936-900X

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#### **Publication Date**

2022

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## 4 Preparing for Discharge: A Workshop on Communicating Diagnostic Uncertainty

*Maria Poluch, Jordan Feingold-Link, Nethra Ankam, Jared Kilpatrick, Danielle McCarthy, Kristin Rising, Dimitrios Papanagnou*

**Learning Objectives:** Demonstrate a workshop designed to teach third year medical students how to communicate diagnostic uncertainty.

**Background:** Diagnostic uncertainty abounds in medicine. Effectively communicating that uncertainty is critical to high-quality patient care. There is a gap in training preparing medical students for communicating diagnostic uncertainty. The Uncertainty Communication Checklist (UCC) is a framework to effectively communicate diagnostic uncertainty to emergency department patients at discharge.

**Educational Objectives:** We developed a workshop to address a curricular gap in preparing medical students to communicate diagnostic uncertainty to patients. Its objectives were to introduce learners to diagnostic uncertainty, discuss the importance of effective communication during times of diagnostic uncertainty, describe key steps for effectively communicating uncertainty, and practice communication through peer role-play.

**Curricular Design:** We designed a workshop leveraging the UCC and role-play scenarios for third-year medical students. The virtual workshop was conducted at the conclusion of their core clerkships. Pework included reflection prompts and an interactive online module. The workshop began with a didactic lecture to reinforce these materials. Students completed a peer role-play in which a provider must discharge a patient from the Emergency Department with an uncertain diagnosis. The session concluded with small group faculty facilitated debrief sessions.

**Impact:** Anonymous post-session survey data (76% response rate; 202/265) indicated that most (82%; 152/185) students felt more comfortable with communicating diagnostic uncertainty after the workshop. A majority (83%; 166/201) indicated it was useful, and most (81%; 149/184) felt it should be included in the curriculum in the future. Further studies are needed to identify students' comprehension and application of uncertainty communication training.

## 5 Transitions to Life After Residency: A Curriculum for Senior Emergency Medicine Residents

*Byron Parker, Lauren Querin*

**Learning Objectives:** To understand the value of a senior EM resident curriculum that introduces knowledge and

skills for successful navigation through the life and career transitions that occur during the final year of training.

**Introduction:** The final year of residency is filled with refining clinical skill and knowledge, but also with anticipation of professional and personal changes as residents prepare for the transition to life as an attending. There is existing literature to demonstrate a lack of resident familiarity in several personal and professional skills necessary to navigate life after residency, but there is sparse literature on curricula dedicated to guiding trainees in making a successful transition.

**Educational Objectives:** To deliver an aptly timed curriculum to senior EM residents with the goal of introducing desired knowledge and skills for successful navigation through the life and career transitions that occur during the final year of training.

**Curricular Design:** The design followed Kern's steps of curriculum development. A targeted needs assessment was administered to recent alumni and identified 8 key topics: contract negotiation, supervising midlevel providers, debt repayment, personal finance, critical care billing, documentation, insurance, home buying. An abbreviated pilot was delivered in May 2021, which promoted modifications in timing of content delivery. The curriculum is now delivered longitudinally with sessions timed in conjunction with when residents will be able to apply the content. Sessions include brief interactive lectures followed by group discussions. They are given by faculty/alumni with interest/expertise in the content area.

**Impact/Effectiveness:** Preliminary data from the pilot was collected via pre/post curricular surveys and demonstrated a post-curricular improvement in >72% of perceived proficiency measures. Success in life as an attending is not solely built on medical knowledge and clinical ability, but also on practical life skills that are often overlooked during residency. We encourage residency program educators to incorporate dedicated time towards teaching these skills as a part of training residents for independent practice.

## 6 Development of an educational experience for medical students on coping with medical errors in residency and beyond

*Hai Le, Sharon Bord, Julianna Jung*

**Learning Objectives:** To design an educational experience for senior medical students that addresses coping with medical errors.

**Introduction:** Navigating and coping with medical errors, which are inevitable realities of clinical practice, is an important physician competency. While medical students and residents recognize the importance of this topic, medical training programs vary substantially in their approach to teaching about medical error, and many offer no formal instruction in this topic.