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Author

Bisgaier, Matthew

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and are expected to be present for at least 20 shifts over a semester. Students serve as a patient care concierge by carrying a mobile phone and providing patients with the phone number to be reached for questions or concerns. The goal is for students to improve patient and family experience and reduce the need for physician and nursing attention.

Impact/Effectiveness: The patient task facilitator program has been active since 2019. Forty-two students and eight attending physicians have participated. Three students (7%) with engagement below expectations were removed from the program. The program is modified based on feedback, which is obtained semi-annually. Adaptations included ensuring consistent mentor pairing, increased phone availability, and internal promotion of the program. Faculty and student satisfaction was high, 74% of students reported plans to pursue careers in medicine and faculty reported improved productivity, patient satisfaction, and nursing availability.

29 Curriculum Overlap between EMS and Disaster Medicine Fellowship Programs in the United States

Matthew Bisgaier

Background: Disaster medicine (DM) is an emerging subspecialty focused on patient and population care in the disaster setting. Some emergency physicians are involved in DM fellowship training as learners and faculty. In 2023, the Council of Disaster Medicine Fellowship Directors published the Model Core Content of Disaster Medicine, defining core competencies for DM fellows. Previous studies examined training in EMS fellowships. We aimed to identify content areas common to both EMS and DM fellowship training.

Methods: A 59-question survey was sent to active DM fellowship programs in the U.S. via the Fellowship Directors' listserv from May to June 2024. The survey collected data on program demographics, educational content, and resources. Findings were compared to EMS fellowships training.

Results: Thirteen programs (93%) responded. Programs typically offered three positions yearly, with 88% filled, and seven faculty members. Fellowship duration varied, but 92% could be completed in one year. Most fellows (79%) were EM trained. Six programs accepted international fellows, and two accepted advanced practice providers. DM fellowships provided a broad range of educational activities, with some significant differences from EMS fellowships. DM training emphasized disaster planning across health systems and partnerships with regional/state coalitions, EMS agencies, and federal agencies. Both DM and EMS fellows participated in mass gatherings. DM offered additional opportunities including HAZMAT, wilderness medicine, infectious disease response teams, and law enforcement topics.

Conclusions: This study identified shared educational activities in DM and EMS fellowships. Findings highlight opportunities for collaboration between DM and EMS on educational activities such as disaster planning in EMS, special operations, mass gathering events, urban search and rescue. As DM develops, clearer distinctions may enhance the specialty.

30 Enhancing Medical Student Confidence in Managing Patients with Mental Health Crises and Patients in Law Enforcement Custody

Miguel Navarro, Max Berger, Stephen Villa, Annette Dekker, Sohyun Park

Background: EM physicians must be proficient in caring for vulnerable populations, including individuals with decreased autonomy such as those experiencing mental health crises and patients in law enforcement custody. Prior to EM rotations, students rarely have any experience with the "medical screening exam" (MSE), Emergency Medicine Treatment and Labor Act (EMTALA) and how this applies to caring for patients. We designed a curriculum to help prepare students for caring for these vulnerable populations.

Educational Objectives: To introduce core clerkship medical students to: the MSE; caring for patients experiencing a mental health crisis; and ethical/legal considerations in caring for those in law enforcement custody

Curricular Design: Three 10-minute asynchronous modules were created: 1) MSE and EMTALA and the approach to patients 2) experiencing mental health crises and 3) in law enforcement custody. Learners completed all 3 modules including a 10 question pre/post test knowledge assessment. The posttest contained a self-reported confidence assessment and free response question regarding potential changes to their future clinical practice. Impact/Effectiveness All 172 EM clerkship students at our institution completed the modules during the 2023-2024 academic year. Self-reported confidence in addressing an MSE improved from 3.09 pretest to 3.92 posttest on a 1-5 scale ($p<0.001$). After the modules, 75% of students agreed that they felt better prepared to care for patients in law enforcement custody, and 81% of students agreed that they felt better prepared to care for patients experiencing a mental health crisis. Qualitative analysis revealed improved understanding of legal involuntary hold protocols, increased attention to patient privacy, and enhanced legal and ethical awareness regarding patients in law enforcement custody. Representative quotes are shown in Table 1. There was no statistically significant improvement in scores on the medical knowledge assessment.
Impact/ Effectiveness: This targeted educational intervention enhanced medical student confidence in caring for these vulnerable populations. Incorporating these modules into EM