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Title

Implementation and Evaluation of a Resident-as-Teacher Inpatient Curriculum in Family Medicine

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Background: Family medicine residents play a major role in inpatient teaching, yet structured resident-as-teacher curricula are limited by competing clinical demands, inconsistent teaching expectations, and limited protected teaching time.

Objective: To implement a standardized inpatient teaching curriculum to support resident-as-teacher development and improve intern confidence in managing common inpatient conditions.

Data and Methods: An inpatient curriculum was implemented on the UCSD Family Medicine inpatient service, distributed through a shared digital platform and physical binder. Pre-, mid-, and post-implementation surveys assessed intern confidence in inpatient management and senior resident preparedness for teaching. A mid-cycle needs assessment evaluated barriers to curriculum use. Data were analyzed using descriptive statistics and qualitative feedback review.

Results: At baseline, 50% of interns reported confidence managing inpatient conditions. Approximately half of senior residents reported moderate teaching confidence. Mid-cycle, 50% of senior residents reported using the curriculum with reported barriers of limited awareness, time constraints, and unclear teaching expectations. Post implementation data is pending.

Conclusions: A standardized inpatient teaching curriculum is feasible and may support resident teaching and learner development. Sustained adoption may require protected teaching time, clearer expectations, and stronger workflow integration.