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Resident Generated ABEM Style Questions and Online Quiz Producing Program as a Cost Effective Method for Resident Medical Knowledge Milestone Assessment

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Background: The Accreditation Council for Graduate Medical Education (ACGME) defines 23 milestones with associated sub-competencies along a continuum for which residents are evaluated throughout their residency training. Frequent assessments, such as the ABEM inservice examination, quizzes, question banks, and clinical knowledge assessments, are integral to the accurate evaluation of the medical knowledge milestone. Our program employs a flipped classroom curriculum where assessments are vital to ensure adequate preparation for small group sessions.

Educational Objectives:

- Utilize resident authored ABEM style questions and online test generating software to produce a cost effective method for a more robust resident medical knowledge milestone assessment.
- Evaluate resident preparation for weekly small group discussions.

Curricular Design: As part of the flipped classroom pre-requisite preparation for small group discussions, learners are required to author one ABEM style question for each core content topic covered each week. Questions are assembled into a question database and provided to a member of the residency program leadership for review. The 10 best questions are chosen to comprise the weekly quiz. The quiz is produced using EasyTestMaker, which is available online for a yearly fee of \$75. Quizzes are released to the residents following the completion of small group discussions, have a 45 minute time limit, and remain active for two weeks. EasyTestMaker generates a data report including resident completion date and grade for each weekly quiz.

Impact/Effectiveness: Purchasing question banks for an entire residency program can be cost prohibitive; therefore, we sought to create a "homegrown" question bank requiring minimal funds. Residents produce high quality questions which result in a more continuous and robust assessment of the medical knowledge milestone. These assessments also allow program leadership to evaluate resident preparation for small group sessions as well as residents who may require remediation or additional instruction regarding the medical knowledge milestone. Residents also have access to review the entire question bank as another method to prepare for the ABEM inservice examination.

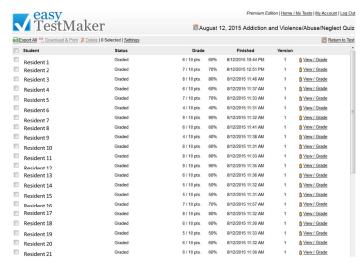


Figure 1.

52 Resident led Sim Debrief as a Longitudinal Learning Model

Pelikan A, Hayes A, Sampson C, Bausano B, Koboldt T/ University of Missouri-Columbia, Columbia, MO

Background: Simulation based education has rapidly become a cornerstone of emergency medicine resident education. These are carefully constructed clinical scenarios designed to give learners the opportunity to deal with real life emergencies in a controlled setting. The lessons learned are often deeply ingrained as they are from a personal experience versus reading about a topic or listening to a lecture. Unfortunately, the valuable lessons learned from Sim cases often ends with the case resolution, or at best following a debrief immediately afterwards. Using a longitudinal multi-week Sim debrief model, residents are able to take charge of their education and expand their knowledge base along with that of their classmates.

Educational Objectives:

- To enhance resident education through first hand experience via Sim cases ("to learn by doing")
- To fully utilize the educational opportunity presented in a simulation case
- To give residents the opportunity to teach their classmates using whatever

Curricular Design: Our Sim debrief model is based on a 3 week plan. Week one is the simulation session. This typically consists of 3 cases focused on high stakes medical scenarios. Teams of 5 residents rotate through all the cases, with the intent of having 3-5 main topics to design a mini-lecture on. Week two is presentations. Residents have a week to reflect on their performance and read up on the topic of their case. Presentations are meant to be informal, high-yield, and equally educational for