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minority of strategies included observation by learners (i.e. residents watching staff perform their duties) or by explicit role-modelling by attendings (i.e. faculty members would take residents around to show them how the job is done).

Conclusions: : Although very few participants noted formal training in the area of task prioritization, both practicing academic physicians and residents were able to describe various methods by which task prioritization skills are informally demonstrated or specifically coached in the clinical environment. More research in this area may be useful in providing both faculty members and residents with useful approaches to acquiring the skill of task prioritization.

Holes in the FOAM: An Analysis of Emergency Medicine Residency Curriculum Comprehensiveness Represented in Online Resources

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Background: Primary literature, textbooks, and didactics compose traditional emergency medicine (EM) resident curricula. Recently, online medical education resources (OMERs), also called Free Open Access Meducation (FOAM), have become available and are utilized increasingly by EM residents. However, no studies have ascertained if there are curriculum gaps in these online resources.

Objectives: We hypothesize that OMERs represent an uneven distribution of topics across the EM curriculum.

Methods: This retrospective analysis compares subject representation in OMERs to that of the American Board of EM's (ABEM) content blueprint for the national qualifying exam.4 Included OMERs were curated from the Academic Life in Emergency Medicine (ALiEM) Approved Instructional Resources (AIR) series, which analyzes and grades online content from the top 50 Social Media Index sites within the previous 12 months following the Council of EM Residency Directors testing schedule. For content areas not yet covered by the AIR series, projected numbers were used following the ABEM content blueprint.

Results: As compared to the ABEM content blueprint, areas that demonstrated a =3% representational difference in online resources were cardiovascular (+10.9%), thoracic/respiratory (+3.0%), HEENT (-3.7%), and hematologic and infectious diseases (-5.5%) as seen in Table 1.

Conclusions: There is a disproportionate amount of attention paid to cardiovascular and thoracic/respiratory topics in the FOAM world. This may be multifactorial, such as having more exciting, procedurally-intensive, and/ or higher acuity topics, appealing to a wider group of authors and learners. Our findings are limited because we

followed the CORD testing schedule, which may not have the same representation priorities as the ABEM content blueprint. Also the AIR series was curated from only the top 50 Social Media Index sites, which may have skewed the distribution of reported OMER content. Our preliminary data showing uneven content distribution and curricular gaps in OMER topics can hopefully help guide the development of future online resources to generate a more comprehensive educational resource for learners.

ABEM Content Blueprint Subject Area	% Representation of ABEM National Qualifying Exam	Corresponding AIR Module(s)	Number of AIR OMER posts	% Representation of AIR OMER posts	% Difference Between ABEM and OMER Content Representation						
						Cardiovascular	10%	Cardiology 1 & 2	190	20.9%	10.9%
								Peripheral Vascular Dx			
Traumatic	10%	Trauma [anticipated]	91	10.0%	0.0%						
Signs, Symptoms,	9%	n/a	82	9.0%	0.0%						
Presentations											
Abdominal/GI	8%	Abdominal, GI	73	8.0%	0.0%						
		[anticipated]									
Procedures, Skills	8%	n/a	73	8.0%	0.0%						
Thoracic/Respiratory	8%	Respiratory 1 & 2	100	11.0%	3.0%						
Hematologic + ID	7%	ID/Heme/Onc	14*	1.5%	-5.5%						
HEENT	5%	HEENT	12	1.3%	-3.7%						
Nervous System	5%	Neurology [anticipated]	46	5.0%	0.0%						
Toxicology	5%	Toxicology	33	3.6%	-1.4%						
Ob/Gyn	4%	Ob/Gyn	15	1.7%	-2.3%						
Psychobehavioral	4%	Psychiatry	15	1.7%	-2.3%						
Environmental	3%	Environmental 1 & 2	37	4.1%	1.1%						
Musculoskeletal	3%	n/a	28	3.0%	0.0%						
(non-traumatic)											
Renal/Urogenital	3%	Genitourinary/Renal	31	3.4%	0.4%						
Other	3%	n/a	27	3.0%	0.0%						
Endocrine/Metabolic	2%	Endocrinology	15	1.7%	-0.3%						
Immune Disorders	2%	n/a	19	2.0%	0.0%						
Cutaneous	1%	Cutaneous [anticipated]	9	1.0%	0.0%						
TOTALS	100%		909	100.0%							

Table 1. Subject area distribution comparing the ABEM contentblueprint and OMERs from the ALIEM AIR series search. Subjectareas not covered by the AIR series are in italics, along with theirdistribution numbers assuming that they matched the ABEMblueprint percentages. The shaded cells respresent and over-representation of OMER content compared to the ABEM blueprint.A full search was not performed for this first AIR Series module,and 14 posts may under-represent the total number for Heme/ID.

34 How do the Previous Experiences of Medical Students Relate to When and Why They Choose Emergency Medicine as a Specialty

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Background: Little is understood about the factors that influence medical students to choose Emergency Medicine (EM) as their specialty of choice. When these students ultimately make this decision is equally mysterious. The current literature regarding the career selection process has generally focused on the differences between medical students' preferences on income and lifestyle.

Objectives: This study seeks to understand both when medical students make the decision to apply to EM as a