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Title

Simulation and Standardized Patient Encounters as a Method to Assess Residents in Patient Safety (SBP1) Milestones Routinely Identified as Difficult to Evaluate in the Clinical Setting

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identified as difficult to routinely assess in the clinical setting.
2. Acquire multiple data points to ensure resident achievement in the defined sub-competencies in order to provide more accurate feedback to our learners.

Curricular Design: Several simulation cases were developed to specifically assess participating residents in the patient centered communication (ICS1) milestone. The level 4 sub-competency addresses the ability to use flexible communication strategies to resolve specific ED challenges such as delivering bad news and drug seeking behavior was identified as difficult to routinely assess in other arenas. The cases involving the delivery of bad news involved an incidental lung nodule concerning for cancer, ethylene glycol with multi-organ system failure, and severe esophageal variceal bleed. A case of a patient with chronic back pain evaluated the residents' ability to deal with the drug seeking patient.

Impact/Effectiveness: Targeted simulations can be successfully designed to acquire multiple data points to ensure resident achievement in defined difficult to assess milestones in order to provide more accurate feedback to residents. Level 4 of the ICS1 milestone addressing ED challenges was identified as difficult to assess routinely in the clinical setting. Our cases provide education faculty the means to ensure accurate assessment of resident achievement in this particular milestone. Resident feedback regarding this simulation and opportunity for assessment was overwhelmingly positive.

59 Simulation and Standardized Patient Encounters as a Method to Assess Residents in Patient Safety (SBP1) Milestones Routinely Identified as Difficult to Evaluate in the Clinical Setting

King A, Calcara D, Liddil J, Greenberger S, Panchal A, McGrath J, Green B, Khandelwal S/Ohio State University, Columbus, OH

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. The unpredictability of clinical practice results in significant variation in the ability to assess resident achievement of certain sub-competencies and milestones. Simulation is a key component of emergency medicine resident education and should be utilized in resident assessment of milestones which are difficult to routinely evaluate in the clinical setting.

Educational Objectives:
1. Develop unique simulation cases and standardized patient encounters designed to assess participating residents in specific milestone sub-competencies identified as difficult to routinely assess in the clinical setting.

2. Acquire multiple data points to ensure resident achievement in the defined sub-competencies in order to provide more accurate feedback to our learners.

Curricular Design: A simulation case involving a traumatic splenic rupture was specifically designed to assess participating residents in the patient safety (SBP1) milestone. The level 4 milestone sub-competency, leads team reflections - such as a trauma debrief, was identified as difficult to routinely assess in other arenas. During the simulation encounter, the patient is found to have a positive FAST scan and grade IV splenic laceration. Despite adequate management the patient decompensates and is taken to the operating room. The team leader is evaluated upon their ability to initiate and lead a team debrief regarding the patient's trauma resuscitation.

Impact/Effectiveness: Targeted simulations can be successfully designed to acquire multiple data points to ensure resident achievement in defined difficult to assess milestones in order to provide more accurate feedback to residents. The level 4 SBP1 milestone sub-competency, leads team reflections, was identified as difficult to routinely assess in the clinical arena. Our case provides education faculty the means to ensure accurate resident achievement of this particular level 4 milestone. Resident feedback regarding this simulation and opportunity for assessment was overwhelmingly positive.

60 Simulation and Standardized Patient Encounters as a Method to Assess Residents in Professional Values (PROF1) Milestone Routinely Identified as Difficult to Evaluate in the Clinical Setting

King A, Calcara D, Liddil J, Greenberger S, Panchal A, McGrath J, Green B, Khandelwal S/Ohio State University, Columbus, OH

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. The unpredictability of clinical practice results in significant variation in the ability to assess resident achievement of certain sub-competencies and milestones. Simulation is a key component of emergency medicine resident education and should be utilized in resident assessment of milestones which are difficult to routinely evaluate in the clinical setting.

Educational Objectives:
1. Develop unique simulation cases and standardized patient encounters designed to assess participating residents in specific milestone sub-competencies identified as difficult to routinely assess in the clinical setting.
2. Acquire multiple data points to ensure resident achievement in the defined sub-competencies in order to provide more accurate feedback to our learners.