

Abstract Form

Hospital Affiliation:	UCLA Medical Center
Presenter Name (Last, First):	Bailey, Katherine
Co-Authors:	Rachel Sarnoff, Will Cope, Rachel Ohman, Antonio Pessegueiro
Project Title:	Evaluating Schema Curriculum in Medical Education

Research Category (please check one):

<input type="checkbox"/> Original Research	<input type="checkbox"/> Clinical Vignette	<input type="checkbox"/> Quality Improvement	<input checked="" type="checkbox"/> Medical Education Innovation
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Abstract

Introduction:

Diagnostic reasoning is an important skill to develop in internal medicine. Prior literature states this skill is largely acquired during clinical rotations, but this is limited by the number and variety of patients, the clinical setting, supervision, and feedback. The optimal method for teaching diagnostic reasoning remains uncertain. This academic year, the UCLA Internal Medicine (IM) noon conference curriculum implemented weekly schema sessions. We aim to provide education on high yield foundational topics, evaluate trainees' learning experience, and assess trainees' confidence in their ability to implement schemas in the clinical setting.

Methods:

UCLA IM faculty facilitated schema sessions by framing variable disease manifestations into a narrative of clinical relevance. In-person learners at UCLA medical center and additional learners by zoom were surveyed. Eligible participants included second through fourth year medical students and IM or Med-Peds residents who attended at least one schema session. A QR code and URL link with survey questions were disseminated. Survey questions asked about prior exposure to schemas, attendance, relevance of schemas to clinical training, comparison of schemas to traditional didactics, confidence with the material, and likelihood of clinical application. The statistical procedures were descriptive analyses including mean, median, range, and tallies.

Results:

Thirteen trainees were evaluated. Seven (54%) were interns, 4 (31%) were residents, and 2 (15%) were medical students. Eleven (85%) participants attended up to 3 sessions, 1 (7.7%) attended 7 to 9 sessions, and 1 (7.7%) attended 10 or more. A majority (77%) of trainees had prior exposure to schemas, largely online resources or medical school curriculum. 62% felt schema sessions were both relevant and helpful to clinical training. The majority either agree or strongly agree that schemas are more effective (85%) and are more high yield (77%) than traditional didactics. Only 70% report schemas are more engaging than traditional didactics. Prior to schema implementation, trainees rated their confidence level as a 2 (31%) or 3 (69%) on a 5-point scale. After schema exposure, confidence levels were reported at 3 (31%), 4 (54%), and 5 (15%) on a 5-point scale. 85% of trainees were very likely to apply this knowledge in the clinical setting whereas 15% felt neutral.

Conclusion:

Overall, schema sessions are reported to be relevant to clinical training as well as more effective and high yield compared to traditional didactics. There is a general increase in confidence level of the conceptual framework at hand, and a majority of trainees were more likely to apply this knowledge in the clinical setting.