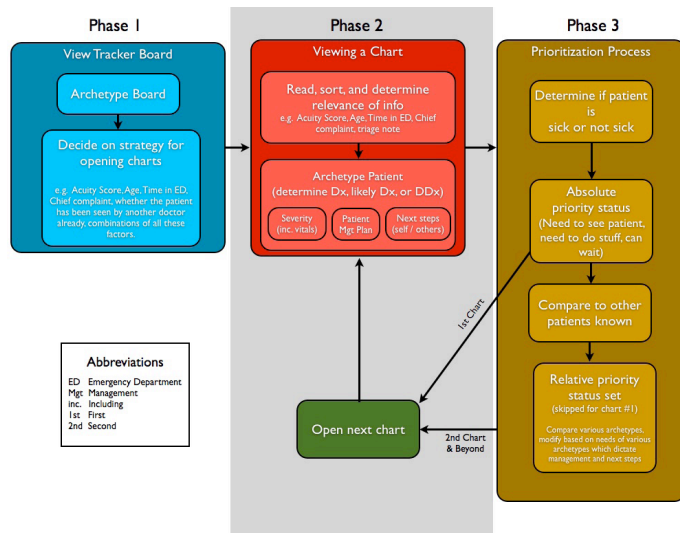


Figure 1.



36 Human Trafficking Didactic Session Resulted in Improved Awareness

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Background: It is estimated there are 25 million victims of human trafficking (HT) worldwide. Approximately 20,000 people are trafficked into the US annually. In 2014, less than 5100 victims were identified in the US despite the fact that up to 88% of victims of HT have contact with health care providers. This gives providers a unique opportunity to identify individuals of HT.

Objectives: The purpose of the study was to evaluate the effect of a HT presentation on participant awareness.

Methods: We performed a prospective cohort study of residents and rotating medical students in our university-based EM residency program. Participants were given a 45-minute presentation that focused on HT awareness, identification, and available resources. To assess knowledge and retention a 15 point quiz was given on three occasions. Quiz 1 was given prior to the presentation, quiz 2 was given one day following the presentation, and quiz 3 was given approximately three months following the presentation. Participants were excluded if they were unable to attend the presentation.

Results: Participants had a significant increase in HT knowledge following the presentation. There were 25 eligible participants. Two were excluded because they were unable to attend the presentation. Pre-presentation quiz and one day post-quiz were completed by 23 participants. Four participants didn't complete the 3 month post-quiz. Paired t-test analysis was performed. Mean pre-presentation score was 8.2 out of a total of 15 points. One day mean post-presentation score was 13.2 with a mean difference of 4.9 (95% CI, 4.1-5.7; p-value < 0.001). Three month mean post-presentation score was 10.1 with a mean difference of 1.7 (95% CI, 0.4-3.1;

p-value<0.0141). There was a significant decline between the immediate post-quiz and the 3 month post-quiz, mean difference 3.3 (2.4-4.2; p-value<0.0001).

Conclusions: One presentation significantly increased participants' knowledge of HT. Annual education is recommended to strengthen participants' abilities to identify victims of human trafficking and to maintain a high level of awareness. Future areas of investigation will focus on the ideal timing of refresher presentations on HT and whether increased awareness among residents and faculty results in increased victim identification in the clinical setting.

37 Identification and Instruction of Core ECG Interpretation Skills Necessary for Emergency Medicine Residency Readiness

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Background: Adequate knowledge and recognition of multiple ECG abnormalities is essential for residency readiness. There is no clear consensus regarding core ECG interpretation skills necessary for Emergency Medicine (EM) residency. Confidence and proficiency in first year residents in ECG interpretation skills is low. The optimal way to teach ECG interpretation skills needs further investigation.

Objectives: Determine the core ECG findings incoming EM residents should recognize.

Evaluate a flipped classroom approach to teaching core ECG interpretation skills.

Methods: We surveyed EM faculty at 7 EM residency programs to determine the most important ECG findings that incoming EM residents should recognize. We used the top 20 findings to create a test for senior medical students during their 4th year EM Clerkship. 74 students were pretested on ECG interpretation during the first week of the clerkship. Students then completed a web-based asynchronous learning module followed by a readiness assurance quiz upon module completion. Each student next attended a small group interactive discussion to review the ECG interpretation concepts plus clinical correlation questions related to the 20 ECG findings. Students were retested 2 weeks later using the same exam as the pretest. A convenience sample of 22 students was retested 1-5 months following intervention providing retention data.

Results: 106 EM faculty from 7 residency programs responded to the survey (49%). Of 44 ECG findings, 20 were selected by more than 65% of respondents. Faculty felt the majority of incoming EM residents' ECG interpretation skills were at or below expected level. Over 40% of students couldn't identify 4 of these 20 core ECG findings during pretesting (Table 1). Following our intervention, total ECG interpretation test scores significantly improved from pretest to both posttest and retention (p < .001, r = .78), but there was